



Application for Funding

“Mission Statement

The Society was formed in November 2013 to support the advancement of talented young musicians in Gloucestershire. Our objectives are defined as supporting young musicians with the provision of instruments and the funding of master classes with eminent musicians.

Within the scope of these objectives the trustees of the fund have wide powers of discretion to make grants to support young musicians, in need, with the cost of studying music. The trustees may also elect to make a contribution towards the cost of a particular scheme rather than meeting the entire cost. The following are the kinds of activity which should benefit from the Fund and are listed as guidelines: the purchase of instruments, fees, travel costs and expenses while attending tutorials, books and scores for study, visits to festivals to compete or observe.

The committee meets quarterly but will always endeavour to give immediate consideration to any urgent request.

Patrick Daly - Chairman/ Founder”

Please note:

- We support local young people who have proved to be talented in the music genre ie: musicians and vocalists.
- Applicants must be under 18 years of age
- Applicants must be resident in Gloucestershire ➤ We do not fund private instrumental or vocal lessons ➤ Only one application may be made in any calendar year.
- All applicants will be considered solely on the basis of the completed form and any attachments, taking into consideration the need and support required as agreed by your independent referees.
- A decision will be made at the next general meeting of the committee following receipt of the application. The committee meets quarterly.
- Please complete the application form in full.
- The application should be in the young person’s name but parents / guardians will have to sign the declaration if the applicant is under 16 years of age.

➤ Please return the completed form to the Chairman of the Society, using the address at the end of the application form.

Surname: _____ **Title:** Mr / Miss / other _____

First name (s) _____
(in full) **Date of Birth:** ____ / ____ / ____

Age:

Address:

Post Code:

Tel: _____ (with STD code) Mobile: _____

Email: _____

Parent / Guardian:

Full Name: _____

Address: (If different from your own)

Tel: _____ (with STD code) (if different from your own)

How did you hear about Brimpsfield Music Society?

What is the funding for?

Please give a full explanation as to why you are requesting funding

How will the funds support the reason

Please state the amount of funding for which you are applying £ _____

Are you able to contribute to this? _____

Have you applied to any other society or charity for this same funding? _____

By which date is the funding required?

Have you applied to the Society before, if so when (give date{s})

Whom should a cheque be made payable to (full name)? _____

Tutor / Teacher approval (Please note a written recommendation from your tutor and or teacher and must be included with this application form)

Title: _____ Full Name: _____

School / College:

Signed

Date:

Declaration

I confirm that information given is correct. I agree that Brimpsfield Music Society may contact my tutor / teacher if so required.

Full Name:

Signature

Date:

Parent / Guardian signature if applicant is under 16

Full Name:

Signature

Date

Your application will be processed and a decision will be taken by the committee at the next quarterly general meeting. You will be informed of the result as soon as possible after the meeting.

Email or Fax application will not be accepted.

Please send your completed application to

The Chairman,
Brimpsfield Music Society,
Pear Tree Cottage,
Brimpsfield,
Gloucestershire
GL4 8LD