



Wolves Aid

application form

Please fill in and include with your letter of application, copy of constitution and audited accounts.

Date of Application								
Name of Charity/Organisation				Year Set up				
Registered Number								
Main Purpose of Charity/Organisation								
Any other name(s) Charity is known by								
Description of project to be funded (please attach supporting sheets as required)								
Have you applied to us before?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	If so, when?			
CONTACT DETAILS								
Name								
Position								
Telephone								
Address for Correspondence								
E Mail								
Website								
Please give a brief outline of your reason for seeking funding								
Are you seeking (please tick)	Capital Funding	<input type="checkbox"/>	Project Funding	<input type="checkbox"/>	Core Funding	<input type="checkbox"/>	Any/ALL	<input type="checkbox"/>
If a specified amount, how much?								
Have you applied for or received other funding for this project - if yes, please identify.								
How did you hear of Wolves Aid or find our Website?								

When complete please return to:
Wolves Aid, Molineux Stadium,
Waterloo Road, Wolverhampton, WV1 4QR
Tel: **0871 8808 442**
Email: **wolvesaid@wolves.co.uk**