Allander Youth Activities Charitable Trust

26/____

(founded by Alec J Spalding MBE in 2005) Scottish Charity Number - SC 036882

2026 - Grant Application Form

| 1. The applicant | | | | | | | | |
|---|--|--------|--|--|--|--|--|--|
| Name of body making the application | | | | | | | | |
| 9 | Scottish Charity Number (if applicable) SC | | | | | | | |
| H | Has this body received funding from the Trust before? Yes / No (Please delete as applicable) | | | | | | | |
| I | If Yes please state: - Year Amount of grant £ | | | | | | | |
| (| Grant reference number if known / | | | | | | | |
| 2. P | Purpose of application (including details of travel and accommodation if appropriate) | | | | | | | |
| | | | | | | | | |
| 3. How many young people will benefit from this financial assistance? | | | | | | | | |
| A | Age range 4 to 8 Age range 10½ to 14 Total | \neg | | | | | | |
| A | Age range 8 to 10½ Age range 14 to 17 | | | | | | | |
| | Note:- grants are only available in respect of those under 18 | | | | | | | |
| | Number of adults from your group supervising the activity | | | | | | | |
| 4. Detail of costs involved Total costs of activity/equipment split between main components e.g., travel, accommodation, tents | | | | | | | | |
| ١ | Will any part of these costs be met from elsewhere? Yes / No | | | | | | | |
| I | If YES please state amount and source(s) £ | | | | | | | |

5. How much are you applying for?

Amount £

2026 Grant Application Form (continued)

| 6. Outline timetable | | | | | | | | | |
|--|-------------|----------------------|-------|-------|--------|---|--|--|--|
| Date your activity is due to | take place | Da | te:- | 1 | /2026 | | | | |
| 7. Details of person making the application | | | | | | | | | |
| Name . | | | | | | | | | |
| Position | | | | | | | | | |
| E-mail . | | Tele | phone | | | | | | |
| By completing this form, you confirm that the activities for which funding has been requested will be carried out under the supervision of suitably qualified persons and that insurance cover is in place where appropriate, you also acknowledge how information provided on this form may be used as detailed in the note Applying for a Grant (2026) | | | | | | | | | |
| Signature | | | Date | | / / | | | | |
| 8. Supporting signature / second contact | | | | | | | | | |
| Name | | | | | | | | | |
| Position | | | | | | | | | |
| E-mail . | | | | | | | | | |
| By completing this form, you confirm that the activities for which funding has been requested will be carried out under the supervision of suitably qualified persons and that insurance cover is in place where appropriate, you also acknowledge how information provided on this form may be used as detailed in the note Applying for a Grant (2026) | | | | | | | | | |
| Signature . | | | Date | | / / | | | | |
| 10. Applicant's Bank details | | | | | | | | | |
| Bank | Sort Code | | |] - [| | | | | |
| Branch | Account Nur | | | | | | | | |
| Exact account name (as per bank statement) | | | | | | | | | |
| | | | | | | | | | |
| A copy Pay-in-Slip or Bank Statement must be attached for the above account to enable us to set up your details with our Bank. (Not required if you applied in the last two years unless the | | | | | | | | | |
| details have changed.) | | | | | | | | | |
| For Trust use only | | | | | | | | | |
| Received | | Bank details checked | | | | | | | |
| Acknowledged | | Reconfir | | ation | Yes /N | 0 | | | |
| Logged | | Set up p | _ • | | | | | | |
| Considered Applicant advised | | Second approval | | | | | | | |
| Applicant advised Pay in slip required | Ves/No | Payment notice sent | | | | | | | |