**National Community Event**

**Application Form**

|  |  |
| --- | --- |
| Community Group Name & Address  |  |
| Contact Person  |  |
| Contact Number &Email |  |
| Which Municipal District will your project be located in? | Donegal □ Glenties □ Inishowen □ Letterkenny □ Stranorlar □  |
| Tell us about your group |  |
| Tell us about your event |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Tell us what you will use the funding for*(Please submit evidence of costs/ quotes where possible)* |

|  |  |
| --- | --- |
| **Description of costs** | **Amount** |
|  |  |
|  |  |
|  |  |
|  |  |
| **Total** |  |

 |
| Amount requested  | €   |

|  |  |
| --- | --- |
| Is your organisation registered for VAT? | **Yes**  **No**  **Organisation Tax Reference/****PPSN/Charitable No:** **Failure to provide Charitable Status No or Tax Reference No or Tax Clearance Access No relevant to your group will deem application invalid**  |
| Is your group registered with Donegal County Council Public Participation Network?**Yes**  **No** If not, consider if you would like to join by contacting **mary.clyde@donegalcoco.ie** |

**Declaration**

**I declare the information provided on this form to be true and accurate.**

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Completed application forms should be returned to on or before 5.00 pm on Monday, 8th April 2019:**

Community Development

Donegal County Council

Station Island

Lifford

Co Donegal

F93 X7PK