Benevolent Fund Application

To assist the Trustees in the consideration of your application please complete, sign and date this document and return as soon as possible to:

The Company Secretary, WPBSA, 75 Whiteladies Road, Clifton, Bristol, BS8 2NT

Please be aware that this form must be completed fully for your application to be considered.

Name	Home Tel number
Mobile number	Email
Address	
Please set out below the assistance requi	red
Amount of assistance you are seeking	
Are you seeking a non-repayable grant or a	loan?
If a loan what are your proposals for repayme	ent?

What are the circumstances that have led you to make this application and for what purpose would any grant or loan be used if approved? (if for medical reasons please provide an original letter from your doctor confirming your medical condition and treatment and how this has contributed to your making this application)
ANNUAL INCOME
Details of anticipated prize money for this season (ie. guarantees) if any
Details of any other annual income during the last 12 months (ie wages, income support, housing benefit, jobseekers allowance, pension, tax credits, child allowance/maintenance payments, sponsorship income, interest on savings or any other financial assistance)

Details of other anticipated annual income (excluding prize money) over the coming 12 months (ie wages income support, housing benefit, jobseekers allowance, pension, tax credits, child allowance/maintenance payments, sponsorship income, interest on savings or any other financial assistance)		
Have you applied for any other financial assistance (such as income support) in the last 12 months?		
If so, please provide details		
If that application was declined please state reasons given		
Do you or your partner have any savings or investments? (include money in a bank/building society/National Savings Certificates/bonds/shares/ISA's or property owned in which you do not live etc)		
OUTLINE OF ANNUAL FINANCIAL OUTGOINGS/COMMITMENTS		
Mortgage/rent (Please state monthly figure and whether mortgage or rent and whether in arrears.)		

Household bills (food/clothes/gas/electric/water etc)	
Council Tax	
Hire Purchase payments (state purpose)	
Bank loans (please state amount and purpose of loan)	
Credit card debts (please state how debt incurred)	
Any other longer term debt (please state how debt incurred)	
Please provide any other relevant information that you think will assist the Trustees to fully understand your circumstances and to reach a decision.	
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DECLARATION:-	
declare that to the best of my knowledge the information given on this form is true and corre	ct
understand that I will have to repay any loan that might be approved	
ignature	
Pate	

If you require any help in completing this form please contact the Company Secretary on 0117 317 8216. Your application will be discussed and treated in strict confidence.