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| 65_torridon01_signpost | COMMUNITY FUND  APPLICATION FORM | |  |
|  |  |  |  |
| Name of Organisation: | | Registered Address: | |
| Applicant Name: | | Address (if different from above): | |
| Position: | | Email/Telephone: | |
| Geographical area covered: | | | |
| Please give a brief description of what the organisation does: | | | |
| Amount of funding requested (up to £500): | | | |
| Please give a brief description of how the money will be used: | | | |
| Signed: | | Date: | |
| Print Name: | |  | |

Please return to:

Albyn Housing Society Ltd

FAO Mrs J Soley (Customer Services Manager South)

68 MacLennan Crescent

Inverness

IV3 8DN

[jennifer.soley@albynhousing.org.uk](mailto:jennifer.soley@albynhousing.org.uk)

Please provide a scanned copy of your organisation’s Bank paying-in slip, as proof that you have a Bank account set up for the group.