| SECTION 1: ABOUT THE APPLICANT  |  |   |  |  |  |
|---|--|---|--|--|--|
| 1.2 Name of the Organisation  |  |   |  |  |  |
| This is required again because the front sheet of the application form with your contact details will be removed for data protection and administrative purposes. |  |   |  |  |  |
| Double R Arts   |  |   |  |  |  |
| SECTION 2: ABOUT THE ORG  | ANISATION                              |   |  |  |  |
| 2.1 You need to submit one of the   | e following documents to suppor        | t your application  |  |  |  |
| Please see guidance notes section   | 1.1 before completing this part of the | he form   |  |  |  |
| <ul> <li>☐ Constitution</li> <li>☐ Set of Rules</li> <li>☐ Terms of Reference</li> <li>☐ Articles of Association</li> </ul>                                       |  |   |  |  |  |
| 2.2 How many people are in your   | organisation?                          |   |  |  |  |
| <u> </u>  |  | ······································  |  |  |  |
| Paid Staff  | Volunteers                             | Total Members  Please include here the total number of people who use your organisation and not just elected members. |  |  |  |
| 1 14  | 8                                      | 76  |  |  |  |
|   |  |   |  |  |  |
| 2.3 Has your organisation received funding from the Local Member Grants-Scheme before?  |  |   |  |  |  |
|   |  |   |  |  |  |
|   |  |   |  |  |  |
| □ NO  |  |   |  |  |  |
| Please provide the date received15/_03/_17  |  |   |  |  |  |

This page has been left blank deliberately.

| SECTION 3: BANK DETAILS  |                                 |  |  |  |  |
|--|---------------------------------|--|--|--|--|
| 3.1 We need documentary proof of your group's bank account.  |                                 |  |  |  |  |
| We use the account details provided (e.g. sort code and account number) to make grant payments direct to your organisation's bank account. If you have a building society account please contact us before sending in the application. |                                 |  |  |  |  |
| (Please note - cheque payments are not possible)   |                                 |  |  |  |  |
| ☐ Please attach a <b>copy</b> of your organisation's bank account statement (within the last year). We do not need the organisation's statement of accounts.   |                                 |  |  |  |  |
| 3.2 We need to know if your bank details have changed since you la   | ast received money from LCC.    |  |  |  |  |
| If your bank details have changed and you do not inform us this could de   | elay the payment of your grant. |  |  |  |  |
|  |                                 |  |  |  |  |
| ☐ No - bank details haven't changed/this is the first time applying for ar   | ny funding from LCC             |  |  |  |  |
| SECTION 4: THIS APPLICATION  |                                 |  |  |  |  |
| 4.1 Which County Councillor electoral division(s) will your expendit   | ure cover or benefit?           |  |  |  |  |
| See guidance notes section 2.1. If you are applying to more than one co<br>sure you list all the electoral divisions here.   | ounty councillor, please make   |  |  |  |  |
| Penwortham West  |                                 |  |  |  |  |
|  |                                 |  |  |  |  |
|  | ¥k                              |  |  |  |  |
|  |                                 |  |  |  |  |
|  |                                 |  |  |  |  |
|  |                                 |  |  |  |  |
| 4.2 Name(s) of County Councillor(s) that the grant is being requested  | ed from                         |  |  |  |  |
| Councillor Name  | Amount Requested                |  |  |  |  |
| If you wish to apply to more than one county councillor, make sure you list them all here with the amounts you are asking from each of them. See guidance notes section 2.2.   |                                 |  |  |  |  |
|  | £126.80                         |  |  |  |  |
| David Howarth  | 1120.00                         |  |  |  |  |
| 9  |                                 |  |  |  |  |
|  | 2                               |  |  |  |  |
| Total Amount Requested   | £126.80                         |  |  |  |  |
| Total Amount Hequested   |                                 |  |  |  |  |

### 4.3 What are you going to spend the grant on?

You need to tell us what you are going to buy with the money from the grant, for example, the piece of equipment you are going to buy, or what items you are going to buy if the money is to help with an event you are arranging. Detailed costs are required on the next page.

The grant will be spent on a Dual Chord UHF Wireless Beltpack Microphone System, which will provide us with two microphones that can be used in a variety of performances and events that will take place at Priory Lane Young People's Centre. We will also be purchasing 4 Tie Clip Cardioid Lavalier Microphones that can be used on existing microphones.

#### 4.4 How will the money benefit people in the Councillor(s) division(s)?

See guidance notes section – 2.3. You need to tell us how this money will help your organisation specifically and also the general public who live in the county councillor(s) electoral division, for example will it help bring people together or help stop anti-social behaviour.

The Double R Arts Senior Youth Theatre are performing their latest production 'Raise Your Voice' on March 17<sup>th</sup> – 19<sup>th</sup> 2018. This is a musical comedy production, with many of our young members singing songs throughout the performance. As we like to give our young people and the audience a professional experience as possible we would like to use as many microphones as we can. We currently have 6 working microphones, however 2 were stolen during a break in at the Priory Lane Young People's Centre last Easter. We have coped with the ones available to us, however for this production we need to replace the two that were stolen. These microphones will then be used for future performances and events by Double R Arts and some other user groups of the centre if needed. We find that giving young people a microphone supports them and actually helps build their confidence as they know if they are being given the opportunity to use a microphone we believe they are capable of performing a musical number, even if they doubt themselves. Therefore the purchase of another two microphones will allow us to give this opportunity to more members of our group.

#### 4.5 What is the total cost of the activity?

For example this is the amount it will cost to buy the equipment/hold the whole event.

£ 126.80

4.6 How much are you applying for from the Local Member Grants Scheme?

£ 126.80

4.7 If you are not asking for the full cost of funding for your activity please tell us where the rest of the money is coming from and if it has been secured at the time of your application.

The figures here, together with the figures in 4.6 should add up to the total cost in 4.5.

| How much? | Funding period | Funder/Applied or Confirmed? |  |  |
|-----------|----------------|------------------------------|--|--|
| £         |                |                              |  |  |
| £         |                |                              |  |  |
| 3         | <del>-</del>   |                              |  |  |
| £         |                |                              |  |  |

# 4.8 If you do not get all the funds, or only a percentage of what you require, you need to tell us what will happen to your proposed activity.

It is possible, that your application may be supported, but not for the full amount of funds. If this happens, we need to know if you can continue with your activity, e.g. you may provide an activity for half the intended period.

If we do not secure the funds we will look at raising funds for the microphones in another way. Our production will still go ahead in March, however we will cope with the microphones available to us, but this may mean that we cannot give some of our singers the opportunity to have a microphone in certain musical numbers.

## 4.9 What is the start and end date of the activity or when do you intend to purchase the items/equipment?

Please note you must spend the funds in the current financial year.

| Start Date  | End Date  |  |
|---|---|--|
| Ideally these microphones need to be purchased as soon as possible. They need to be purchased by Thursday March 15 <sup>th</sup> as this is our technical dress rehearsal as we must have them available to us by then. | Voice' is taking place on March 19 <sup>th</sup> , however the microphones will |  |

### 4.10 Please give a detailed breakdown of your expenditure for your activity/equipment.

See guidance notes section – 3.4. The total costs here must add up to the figure shown in section 4.5 for example if you are buying plants and compost for a gardening scheme we need to know how much these are. In addition, if you have a quotation from a supplier please also provide this as evidence of the costs.

Chord Dual UHF Wireless Beltpack Microphone System, 863.8MHz + 864.8MHz - £102

Chord Premium Cardioid Lavalier Microphone for Wireless Systems - £6.20 per item (4 will be purchased with the total cost being £24.80)

Both items will be purchased from CPC Farnell.

| SECTION 5: CONFIRMATION OF ORGANISATION'S POLICIES   |  |  |  |  |
|--|--|--|--|--|
| 5.1 Will the activity involve members of your organisation having significant contact with children or vulnerable adults?  |  |  |  |  |
| See guidance notes section 4.1. If you are purchasing equipment this will not involve children or vulnerable adults. This section is only relevant for example if you are holding an event.    |  |  |  |  |
| Yes  |  |  |  |  |
| □ No – Please go to question 5.4.  |  |  |  |  |
| 5.2 If you have ticked 'Yes' above, does your organisation have children or vulnerable adult protection policies in place?   |  |  |  |  |
| See guidance notes section – 4.1.  |  |  |  |  |
|  |  |  |  |  |
| ☐ No – Please answer question 5.4.   |  |  |  |  |
| 5.3 If you answered 'yes' to question 5.1 are the appropriate individuals cleared by the appropriate DBS Check (Standard/Enhanced/Enhanced with Barred List)                                   |  |  |  |  |
| NB we operate a 'spot-check' procedure, which may require you to provide evidence at a later date.   |  |  |  |  |
|  |  |  |  |  |
| ☐ No – Please answer question 5.4.   |  |  |  |  |
| 5.4 If you have ticked 'No' to either questions 5.1, 5.2 or 5.3, please explain why and why you feel clearance is not necessary to enable us to consider whether your application can proceed. |  |  |  |  |
| If you are purchasing equipment, you need to state here that no children or vulnerable adults will be involved in the purchase of the equipment.   |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

State Aid rules.

The use of the grant is in breach of County Council Policies and Procedures.

We understand that by signing this form, if the application is approved by the County Councillor(s) named, we are contracting to spend the funding as stated in this application form and to provide the monitoring and other information required under the terms of the Local Members Grant Scheme.

#### Declaration

- ✓ We certify that to the best of our knowledge the information provided in the application form is accurate and correct.
- ✓ That the persons below can both sign on the organisation's bank account (please note
  that the two signatories cannot be related to each other)
- ✓ By signing and submitting this form, we agree to the funding agreement detailed here.
- ✓ We declare that the organisation meets the general eligibility criteria as set out in the guidance notes.

We also understand that should this application be successful, the information contained in the application form will be used to form the basis of the funding agreement and for monitoring purposes.

| purposes.  |   | is tarrently agreem |  |
|--|---|---------------------|--|
| Name of Organisation:                                    | R | ARTS                |  |
| SHAUN BRADBURY   |   |                     |  |
| Name of First Signatory (please print)                   |   |                     |  |
| VICE CHAIR.  |   |                     |  |
| Position in the Organisation (please print)              |   |                     |  |
| - Some   |   |                     |  |
| Signature  |   |                     |  |
| Date: 5/3/18   |   |                     |  |
| MARILYN DEVERIU  Name of Second Signatory (please print) |   |                     |  |
| Position in the Organisation (please print)              |   |                     |  |
| Moveril<br>Signature                                     |   |                     |  |
| Data: 6/3/c8   |   |                     |  |

## **Checklist for applicants:**

Please ensure you have completed all sections on this form and have enclosed the necessary supporting documentation - incomplete forms cannot be processed for consideration by the councillor(s).

- I have answered all of the questions on the form
- Attached the necessary supporting documents listed in Section 2
- ✓ Attached a copy of your bank statement
- Completed the declaration with 2 signatures from people who can sign on the organisations bank account
- ✓ Attached a copy of your Child Protection and Vulnerable Adults Policy if you have answered 'Yes' in Section 5.1
- If submitting my application electronically, I have posted a hard copy of the Funding Agreement and Signed Declaration on page 9 and 10.

## In addition, please make sure that:

- You have kept a clear copy of the form for your own records
- You have clearly marked each document with the name of your organisation

Completed application forms should be submitted to the Democratic Services Team via the address below.

Telephone: 01772 533110 or 01772 536552

Email: LPTlocalmembergrants@lancashire.gov.uk

#### Postal Address:

Local Member Grants
Lancashire County Council
Legal and Democratic Services
2nd Floor, Christ Church Precinct
County Hall
PRESTON
PR1 8XJ