

Regional Grant Aid Application Form

Please return this form upon <u>course completion</u>, in BLOCK CAPITALS and return to:
Swim England East Midlands Office, Unit 7, Basepoint Business Centre, Isidore Road,
Bromsgrove Enterprise Park, Bromsgrove B60 3ET or email to <u>eastmidland@swimming.org</u>.

Name: Mr/ Mrs/ Miss/ Ms	
Address:	
Postcode:Telephone Number	:
Club Name:	
Course Level & Title:	
Course Dates:Tot	tal Cost of course: £
Name of Club Secretary:	
Address:	
Authorised by club secretary:	Date:
I confirm as the applicant that all the above inform	ation, is true to the best of my knowledge, and
any changes will be brought to the attention of Sw	im Englang immediately.
Applicants' signature:	Date:
Would you like to apply for additional funding from (Northamptonshire – please use county form)	n your county ASA? Yes / No
As course tutor, I can confirm thatcon	has attended the
Course Tutors Signature:	Date:
Swim England East Midlands will keep your person other organisations without your prior knowledge,	•
Please note that your grant aid will be made payab Only SwimMark club members are entitled to this g	-
Office Use Only-	
Date Paid:	

BACS/ Cheque Ref: