## **YMCA** EAST SURREY

## YMCA

## 1,000 Days of Play BURSARY APPLICATION

YMCA Sovereign Centre Slipshatch Road, Reigate Surrey, RH2 8HA

**T** 01737 222859

**E** sovereign@ymcaeastsurrey.org.uk www.ymcaeastsurrey.org.uk Registered charity number: 1075028

_				
Name of child				
Parent/carer's name				
Address				
Telephone				
Date				]
				]
Reason for bursary				
Please attach copies of correspondence				
Supporting documentation	on attached:			
Child Tax Credit	on accached.			
☐ Housing Benefit				
☐ Income Support				
☐ Income-based Jobse	eker's Allowance	(JSA)		
☐ Income-related Emp	loyment and Sup	port Allowance (ESA	۸)	
☐ Working Tax Credit				
☐ Universal credit				
Letter from a social	worker			
Proof of receipt of fr	ee school meals			
What is the bursary for? Please include dates/				
club requested				
How much is requested f	from the fund?			
TO BE COMPLETED BY	YMCA EAST SUF	RREY CHILDREN &	YOUNG PEO	PLE TEAM
Amount given (amount to be	e transferred)			
Signed Manager			Date	
Authorised (HOCS)			Date	
Parents informed by			Date	