THE BEACON ACTIVITY CENTRE FOR A LIFE OF DISCOVERY	<b>The Beacon Activity Centre Bursary Fund</b> <u>Application Form – PART 1</u> Please read our Bursary Fund policy prior to applying for funding.
CONTACT DETAILS Please type or print clearly – if applying for more than one pupil photocopies of this page can be accepted.	<u><b>Part 1</b></u> To be completed by the school / organisation, on behalf of individuals in need of financial support to attend a visit to The Beacon Activity Centre. One form per person please.
Name of School / Organisation / Group:	
Contact name:	
Role within School / Organisation:	
School / Organisation / Group Address:	
Phone contact:	
Mobile contact:	
Email contact:	
VISIT & GROUP DETAILS	
Visit Dates:	
Purpose for Visit (e.g., Team Building, School Journey, etc):	
School year or age range of group:	
Full Price per person: (of Beacon Activity Centre visit cost excluding transport) before any Bursary Funding has been applied.	
Bursary contribution requested: (Maximum available amount is 50% of The Beacon Activity Centre price per person)	
I endorse this application and confirm the charged by The Beacon Activity Centre.	nat the bursary requested is no more than 50% of the price
Visit Leader / Headteacher / Finance Of	ficer signature:
Date:	





## The Beacon Activity Centre Bursary Fund <u>Application Form – PART 2</u>

<b>Part 2:</b> To be completed in conjunction with a parent/guardian of the child or young person, if you feel this to be appropriate.				
Name (of child or young person):				
Date of Birth:				
Home Address:				
financial assistance is justified. We also	s bursary application so that we can make a fair assessment that request that wherever possible there is a parental contribution roup or other sources. Please state what these contributions will dealt with confidentially).			
What do you expect the named child to gai	n from a visit to The Beacon Activity Centre?			
	e in touch after your visit to ask you to complete a simple feedback ide. We will use this information (confidentially) to report back to ind to help promote future donations.			
Please return this form to The Beaco	on Activity Centre so we can process your bursary application.			

Please note that all bursary requests must be made <u>at least 3 months</u> before the visit date.

We will inform the school of the outcome of bursary requests within 4 weeks of receiving the application.

THE BEACON ACTIVITY CENTRE						
OFFICE USE ONLY						
Award Agreed:	YES		NO			
Amount Authorised:		Authorised by:				