PLEASE USE BLACK INK AND BLOCK CAPITALS

PERSONAL DETAILS (ABOUT THE PLAYER)

| FIRST NAME: | SURNAME: |
|---------------|---------------------|
| ADDRESS: | DOB: |
| | TEL NO: |
| | SCHOOL: |
| EMAIL: | |
| MALE / FEMALE | SQUAD SELECTED FOR: |

FAMILY CIRCUMSTANCES – (in order for the Foundation to understand your family circumstances, please complete the section below with complete honesty)

| HOUSEHOLD INCOME (please tick | Less than £10,000 | £10,000 - £15,000 | | £15,000 - £25,000 | | | | | |
|---|-------------------|-------------------|--|-------------------|--|--|--|--|--|
| one based on all income sources: | £25,000 - £35,000 | £35,000 - £50,000 | | £50,000 or above | | | | | |
| PLEASE EXPLAIN HOW YOU FEEL THAT SUPPORT FROM THE CRACKNELL FOUNDATION IS REQUIRED: | | | | | | | | | |
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PLEASE HIGHLIGHT THE AREAS YOU WOULD LIKE FINANCIAL SUPPORT WITH.

| | VALUE OF FINANCIAL SUPPORT REQUESTED |
|--|--------------------------------------|
| Annual Membership fees and or match fees | |
| PLAYING EQUIPMENT / COI CC CLOTHING: | |
| Other ie Holiday camps etc etc? | |

DECLARATION AND DISCLAIMER – ALL APPLICANTS TO FOUNDATION ARE TREATED IN STRICT CONFIDENCE. DECISIONS ON FINANCIAL SUPPORT ARE BASED ON THE INFORMATION PROVIDED WITHIN THIS APPLICATION. THE CRACKNELL FOUNDATION CANNOT GUARENTTEE ANY AWARD OF FINANCIAL SUPPORT. BY SIGNING THE DECLARATION BELOW I UNDERSTAND THIS AND CONFIRM THE INFORMATION SUBMITTED WITHIN THIS APPLICATION IS FACTUAL.

| SIGNATURE: | | |
|-------------------------|-------|--|
| RELATIONSHIP TO PLAYER: | DATE: | |