



ANNA'S CHALLENGES ACTIVITY GRANT - APPLICATION FORM

PWCF/Recipient Details

Name of Applicant		Address 1	
Email		Address 2	
Phone		Town	
Relationship to child.		Postcode	
Childs Name		Age	

Details of Application:

Items	Cost	Receipt Included	Quote Included

Please note: In the case of quotes for items not yet purchased, Anna's Challenges will pay the supplier directly. Please provide their bank details.

Approved by an authorised member of the Basingstoke CF Team:

Signed	
Print Name	
Position	
Date	
For Anna's Challenges use: Date paid	

Bank Details for reimbursement:

To be paid to family: To be paid to supplier:

Account Name	
Sort Code	
Account No.	

Please send this form and attached quote/receipt to: Priya Ilangovan, c/o Sue Noakes, Basingstoke and North Hampshire Hospital, Aldermaston Road, Basingstoke, RG24 9NA Email: sue.noakes@hhft.nhs.uk Tel: 01256 314797

This form collects your data for the explicit use of providing funds for the requested grant. It is not used for any other purpose and your bank details will not be retained.



Application Terms and Conditions

To qualify for this fund the child must have Cystic Fibrosis AND be a patient registered under Dr Priya Ilangovan.

The application form must be fully completed. Under no circumstances will grants be made for activities that have already been fully funded from another source.

Payments will be made either to the applicant (or caregiver) upon the provision of receipts, or direct to suppliers upon invoice/quote. If we make payment on an invoice/quote, we will require a receipt for our payment. Further grants will not be considered if receipts for previous payments have not been received by us.

Payment will be made by BACS payment. If we are to pay the provider of the goods or service, please provide their bank account details, and details of how they'd like the payment identified.

PLEASE NOTE: We accept no responsibility for payments going astray, if you provide incorrect bank account details.

You may apply to this fund as many times as you wish, up to a maximum of £450 per child during each financial year. Our financial year runs from 1st April - 31st March.

All grants are at the trustees discretion. We reserve the right to refuse any application.

The following is a list of some of the activities covered by this fund. It is by no means exhaustive and if in doubt please contact the CF Physio or Priya Ilangovan.

- Team or individual sports
- Physical exercise equipment
- Horse riding
- Sports Club fees
- Training or sporting lessons
- Singing lessons
- Clarinet/Flute or other blowing instrument lessons
- Swimming lessons
- Trampolines
- Bike
- Gym memberships
- Dancing Classes
- Sporting trips to competitions
- Tumble Tots or similar
- Wii, Xbox Kinect: sports or singing games only

Activities which will not be considered:

- Social gatherings or sports trips which are predominantly social in nature eg holidays (individual or family)
- Clothing classed as non-essential, which includes any clothing that is not activity-specific.
- Non Active Computer/video games

If you have any further queries or need assistance in filling in this form, please contact:

Priya Ilangovan, c/o Sue Noakes, North Hampshire Hospital, Aldermaston Road, Basingstoke, RG24 9NA
Email: sue.noakes@hhft.nhs.uk Tel: 01256314797