

THE RAPHAEL PILGRIMAGE
GILBERT THOMPSON MEMORIAL FUND

GRANT APPLICATION FORM 2018

Name		Title	
Address			
Postcode			
Tel No		Mobile	
E Mail			

Please tick relevant boxes:

Are you applying as a	Helper		Sick Pilgrim	
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What category of helper	Doctor		Nurse	
	Priest		Other helper	
Have you applied before?	YES		NO	
If 'YES' Year of application		Amount granted		

Which Group do you propose to travel with?

Stansted Group		Manchester Group		Youth Group		Other	
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Funding:

Full cost of the pilgrimage	£	How much grant are you applying for?	£	Will you be receiving any other financial support? If so how much.	YES/NO
					£

If you are applying for an amount greater than £150 please explain your circumstances and how much you can afford.

Signed..... Date.....

Decision	Granted/Amount	Not granted/Reason	Date
Administrator's Signature			

Administrators: Kathleen Scahill – Chair, Paul Affleck- Pilgrimage Director
Chris Woodward – Secretary/Treasurer, Frank Galpin