



2020 BURSARY APPLICATION FORM

Name of Club: _____

Wishes to apply for a bursary in respect of:

Name of Candidate _____

BG Membership number _____

Discipline in which the Course was taken _____

Course Venue _____

Cost of Course £ _____

(Travelling expenses are not paid)

Date of course _____

(Between 1st January 2019 and 31st December 2020)

Name of Bank Account (Club only) _____

Bank sort code _____ Account number _____

A copy of the following documents must be included with this form:

Proof of Attendance

☐

(please tick)

Copy of Pass Certificate

☐

(please tick)

NB: Please do not submit your claim until ALL of the documents have been supplied.

Please send to Mr A Dyer, 17 Evans Drive, Lowestoft, Suffolk NR32 2RX

Alternatively the form may be saved as a .doc completed, scanned then e mailed together with the Proof of Attendance and Copy of Pass Certificate by email to: dyer110@btinternet.com

By completing this form the club secretary/club leader is confirming that all their members are current members of British Gymnastics and affiliated to an Eastern Counties Gymnastics Association club.

SIGNED _____ Name _____ DATE _____

POSITION HELD _____ Email Address _____