

**Application Form for Room Hire Rate Subsidy**

Please refer to the pack for guidance on completing this form.

This form is for members who have not had a subsidy from WOCA before.

The Community Association committee will use the information submitted with this application to decide whether the group is eligible for a subsidy, and at what rate.

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| **Group’s name** |  |
| **How does your activity help meet WOCA’s aims?** |  |
| **Are you a WOCA member?** |  |
| **Do you agree to abide by WOCA’s** [**terms and conditions**](https://hubble-live-assets.s3.amazonaws.com/wocc/attachment/file/5/Conditions_of_Hire_Form_Current_2017.pdf)**?** |  |
| **Have you completed a risk assessment for your activity?**If yes, please attach with your application |  |
| **Room wanted** | Hall [ ] Mary Town Room [ ] Seminar Room [ ]  |
| **Meeting day / time and frequency** | **Day**MondayTuesdayWednesdayThursdayFriday SaturdaySunday | [ ] [ ] [ ] [ ] [ ] [ ] [ ]  | **Time**From:                                | To:                                | **Frequency**WeeklyMonthlyQuarterlyOther  | [ ] [ ] [ ] [ ]  |
| Please explain other frequency:       |
| **Contact details** | Name |  |
| Email |  |
| Telephone |  |
| **Expected number of attendees** |  |
| **Which of these best describes you or your group?** **(tick the most appropriate)** |

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| **Charity** with paid staff |  |
| **Organisation** led by volunteers |  |
| **Informal/Unincorporated group** led by volunteers |  |
| **Private start-up business** |  |
| Paid Staff |  |
| Individual |  |
| **Private established business** |  |
| Paid staff |  |
| Individual |  |

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1. **TELL US ABOUT YOUR GROUP**

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| **Who is your group for?** **What are its aims?** **How does your group meet WOCA’s aims and priorities?** You will find these in the Guidance Notes. **What is the connection with West Oxford?** **How do you know there is a need for this group?** |

1. **MONEY**

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| **Will you be charging people to attend your group?** **If so, how much, and what is it spent on?** |

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| **What are the financial constraints which mean that you require a subsidy?**  |

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| **What other sources of financial support have you got, or are applying for (eg grants, sponsorship?)**  |

1. **MARKETING**

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| **What plans do you have to promote and market your activity?** |

1. **MONITORING AND EVALUATION**

**How will your group show you are continuing to meet a community need and are planning to continue this into the future (eg use of attendance records, other evidence)?**