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30/09/24

## **TORPOINT TOWN COUNCIL**

#### **Application for Grant for Voluntary Organisations**

Please note that this application will not be considered unless it is accompanied by a copy of the latest set of annual accounts showing the organisations income, expenditure and level of balances. If the organisation does not prepare annual accounts, copies of the bank statements covering the previous six months must be enclosed.

### **Notes to Applicants**

To help us process your application quickly, please:

- Read the Applicant Guidance Notes carefully
- Complete the application fully we will not consider incomplete forms
- Let us know if you have any questions before sending in your application

Name of organisation	YMCA Torpoint (Part of YMCA Plymouth)				
Full postal address	YMCA Torpoint, Antony Road, Torpoint				
	Postcode: PL11 2NH				
Contact name/position	Karl Curtis / Sports Centre Manager				
Telephone number	07813565740				
Email	Karl.c@ymcaplymouth.org.uk				
Charity Registration Number (if applicable)	1066919				
Project title	Sunday Morning Stay & Play Soft Play & bouncy Castles.				
Estimated start date	Already started – been running for 10 years				

# Please tell us about the project and why you think it should receive the contribution from Torpoint Town Council

Our Mission at YMCA Torpoint is to deliver professional and personable services that support young people and our Community's health and family needs.

Ten years ago, as part of our Non – Surplus Charitable work, we consulted with local families and started a new Inclusive weekly Sunday morning Stay & Play Soft Play/ bouncy castle programme that would support young families at an affordable price.

The project has been a huge success with hundreds of local families over the past 10 years benefiting from health and social outcomes having a safe, friendly environment to bring their children to play and interact whilst parents/carers also socialised with each other.

The programme continues to be delivered by YMCA every Sunday morning between 9am - 12pm with an average of 27 families attending each week during the months of October – March and an average of 13 families attending during April – September.

To ensure the programm to ensure the price of att (£1.75) children aged 3-7	ending rer	mains	as low as possible with c			
However, the weekly ses upgrade soft play equipm bouncy castles in the pas this service to all local fa	nent and b at few year	ouncy	castles. The YMCA have	purchased	d two	big commercial
The funding we are requ soft play equipment for c	_	•		he prograr	mme v	vith new exciting
	-3 -		***************************************			- <u></u>
Who will benefit from parish?	the proje	ect an	d how many of those	are resid	ents (	of Torpoint
All our families who atter mornings to attend.	nd are resid	dents (	of Torpoint. Most familie	s walk to t	he YM	ICA on Sunday
The most common quote programme to attend on						
		•	. 3	,	-	
Project costs (Please provide a breakdown of the costs of the project)	£	p	Funding	£	P	S = Secured A = Applied for (delete as applicable)

Sports Hall Hire per week	90.00	Average weekly income	£77.25	
X 2 Staff Set up/Pack away costs per week	44.00			
Weekly Total Cost	134.00	Weekly Total Income	£77.25	
Annual PIPA certificate testing on bouncy castles	400.00	Amount you are seeking from Torpoint Town Council	500.00	For equipment
		Torpoint Lions Club for equipment	500.00	Secured

# Please note: \*The Total Cost and Total Income amounts must balance

(e.g. Total Cost - £100; Total Income - £100)

Checklist (Please make sure you have included the following with your	<b>√</b>
application)	
Written confirmation of any match funding awarded to your project (a letter or	
e-mail)	
Your organisations latest set of accounts or latest bank statement	

## **Declaration**

I declare that the information supplied in this application is true.

I agree that, if this application is successful, any grant money received will be used for the purposes described in this form and in accordance with the terms and conditions listed below. I confirm that I am duly authorised and empowered to confirm this on behalf of the applicant group.

Signature: K. Curtis

Date: 19/09/2024

Name (Please Print): Karl Curtis