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**Lakes Clubs Expression of Interest form for existing providers**

Please complete this form if you want to apply for funding to help boost clubs you are already offering on the Lakes Estate.

**Section 1 Organisation Information:**

|  |  |
| --- | --- |
| Name and address of organisation |  |
| Lead contact name |  |
| Email |  |
| Phone |  |

**Section 2 Existing Club:**

|  |  |
| --- | --- |
| 2.1 Please provide a summary of the club that you run at present | |
|  | |
| 2.2 Where does the club take place? |  |
| 2.3 When does the club take place (days of the week and times) |  |
| 2.4 Who is the club for? |  |
| 2.5 What is the minimum and maximum number of places available at your club? |  |
| 2.6 Are all the available places full? | Yes  No  If yes, do you have a waiting list? |
| 2.7 How much does it cost to attend your club? |  |

**Section 3 Boosting your club:**

|  |  |
| --- | --- |
| 3.1 How would you use funding to boost your club? | |
|  | |
| 3.2 Will further sessions be added to your club? | Yes  No  If yes, please provide details i.e., number of weeks, months boosts will be available for days of the week and times ? |
| 3.3 Will there be any changes to who can attend the club? | Yes  No  If yes, please provide details? |
| 3.4 To run your club what will be the minimum and maximum attendance number. |  |
| 3.5 Will there be any change to the cost to attend your club? | Yes  No  If so what will the cost be? |
| 3.6 How much funding are you requesting? |  |

**Section 4 Policies and Procedures:**

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| **4.1 Policies and Procedures**  Organisation must be able to demonstrate and explain their safeguarding arrangements and have relevant and appropriate policies and procedures such as:   * + Safeguarding (including appropriate DBS checks for staff and volunteers).   + Health and Safety.   + Insurance.   + Evidence of up to date accounts, and a separate bank account in the organisation’s own name.   + Where clubs are Ofsted registered, clubs must also be compliant with the Ofsted requirements for working with children. |
| Please confirm that you have these in place  Yes  No |

**Section 5 Data and Intelligence:**

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| 5.1 Organisations will be expected to provide information on attendance at each activity. A specific template will be provided for this. |
| Please confirm that you agree to comply with this.  Yes  No |

**Name *(Print Name****)* **Job Title**

|  |  |
| --- | --- |
|  |  |

**Signature Date**

|  |  |
| --- | --- |
|  |  |

Please email a single PDF version of your completed application form with the subject header, Lakes Club to [LakesClubs@milton-keynes.gov.uk](mailto:LakesClubs@milton-keynes.gov.uk)