

FLORAL GUERNSEY COMMUNITY COMPETITION 2025

Name of Community:

We wish to enter the Community Competition Yes/No

If yes, which category? (See community guide)

We wish to apply for the basic grant Yes/No

We wish to apply for the top up grant Yes/No

Please read carefully the terms and conditions as shown in the guide.

Name of lead contact:

Address:

Tel Home:

Tel Mobile:

Email:

Date:

Please give a brief description of the proposed enhancement work, an indication of the likely level of community involvement and the estimated costs:

Your application for a grant implies that you have read and agreed to abide by the terms and conditions as shown in the guide.

Signed:

Date:

Name of Bank Account:

Bank Account No:

Sort Code:

Branch Name & Address:

Please return this form by 21st April to: info@floralguernsey.co.uk