

# **APPLICATION FOR SCHOOL TEAM GRANT**

Please return to Dougal Moir, Berwick Middle School, Lovaine Terrace, Berwick upon Tweed,  
TD15 1LA

## **APPLICANT'S DETAILS:**

**Team**

**School**

**Address**

## **REASON FOR REQUESTING GRANT AID:**

Give details of event and dates including details of expenses incurred.

**CHEQUE PAYABLE TO:**

**DATE OF APPLICATION:**

**NAME, SIGNATURE and POSITION of APPLICANT:**