

Catholic Association Hospitalité of Our Lady of Lourdes

Email: contact@catholicassociation.co.uk

www.catholicassociation.co.uk

REQUEST FOR FINANCIAL ASSISTANCE FOR ATTENDANCE AT AUGUST STAGE

**For approval by Grants Committee on behalf of CA Hospitalité of Our Lady of Lourdes, in conjunction with the Provider of Funds
(To be submitted by 30th June)**

NAME OF APPLICANT Mr/Mrs/Miss/Ms/(Other)

ADDRESS

.....Postcode

TELEPHONE NUMBER DATE OF BIRTH

DETAILS OF PREVIOUS VISITS TO LOURDES (Date, Pilgrimage, etc)

NAME OF CA / HNDL HOSPITALITÉ COMMITTEE OR HNDL AUGUST STAGE GROUP MEDALIST
RECOMMENDING THIS APPLICATION

.....

TEL. NUMBER

STATEMENT TO SUPPORT YOUR APPLICATION (Please continue overleaf if necessary)

Signature of Approver 1:
(Diocesan Director/Group Leader/Hospitalité Member
supporting application)

FOR INTERNAL USE ONLY
(Applicants do not need to provide this):
Signature of Approver 2:

Date:

Date:

Version March 2022