Catholic Association Hospitalité of Our Lady of Lourdes

 $\textbf{\textit{Email:}} \ \underline{\textbf{contact@catholicassociation.co.uk}}$

www.catholicassociation.co.uk

REQUEST FOR FINANCIAL ASSISTANCE FOR YOUNG PERSON FROM WAY DONNELLY FUND

For approval by Grants Committee on behalf of CA Hospitalité of Our Lady of Lourdes

(To be submitted via Young Helpers Leaders by 30th June)

NAME OF YOUNG PERSON Mr/Mrs/Miss/Ms/Other ADDRESS	
Postcode	
TELEPHONE NUMBER	DATE OF BIRTH
DETAILS OF PREVIOUS VISITS TO LOURDES (Date, Pilgrimage, etc)	
NAME OF DIOCESAN DIRECTOR/GROUP LEADER/HOSPITALITE MEMBER RECOMMENDING THE YOUNG PERSON.	
TEL. NUMBER	
AMOUNT OF FINANCIAL ASSISTANCE REQUESTED.	
OTHER GRANTS RECEIVED BY APPLICANT FOR THIS PILGRIMAGE (eg PARISH, DIOCESE, CATENIANS)	
REASON FOR 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	