

# The Chris Maclure Foundation

c/o Wigan & District YFL  
23 Colerne way  
Wigan WN3 6HS  
Email: secretary@wiganyfl.co.uk  
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## Grant Application Form

Name:

Address:

Telephone:

Date of Birth: (If applicable)

Age: (If applicable)

Summary of football history:

Assistance required for:

Level 1 coaching / Refereeing / Kit / Equipment

Details:

Why I would like assistance:

Any other relevant  
information:

Signature:

Date:

Parent Name: (If applicable)

Parent Signature:  
(If applicable)

Authorised by:

Date