# APPLICATION FOR CHARITY COLLECTION AT WYCA

# MANAGED BUS STATION

## Please write in BLOCK CAPITALS

|  |  |
| --- | --- |
| Name of charity. |  |
| Charities registered address |  |
| Registered Charity no. |  |
| Do you work for the charity? | Y/N |
| Do you have Public Liability Insurance to cover a collection? | Y/N |
| Contact name |  |
| Contact address (if different from above) |  |
| Daytime tel. no. |  |
| Email address |  |
| Is the charity represented in the local area? | Y/N  If no, please state area |
| What are the main aims of the charity? |  |
| What station would you like to collect at?  Please choose from the following:  Bradford, Castleford, Dewsbury, Halifax, Huddersfield, Keighley, Leeds and Pontefract | (Please list if more than one station) |
| Proposed date/s for collection | 1st preference:  2nd preference:  3rd preference: |
| Proposed start and finish times for collecting in the station | Start:  Finish: |
| Total no. of attendees  (normally a maximum of 4) |  |
| Has permission for a similar collection been refused by a Local Authority before? | Y/N  If yes please state why – |
| Do you pay your collectors commission? | Y/N |
| Do you pay your collectors expenses? | Y/N  If yes please state approx. level of reimbursement |
| Will you be using a third party professional fundraising agency to collect? | Y/N |
| Will all your collectors be over 18 years old? | Y/N |
| Has the charity collected at a WYCA managed bus station before? | Y/N  If yes, please indicate the date, the location and the total funds raised: |
| Please confirm that all the funds raised will go directly to the charity and will not be used to support a charity challenge or event | Y/N |
| What percentage of your charitable receipts are absorbed by administration costs? | …………..%  Please supply proof or a link to a report to support this statement. |
| Is the signed indemnity form attached/included? | Y/N |
| Are you a member of the FRSB? | Y/N |
| Additional information, for example   * *“I would like to bring a static bike”* * *“There will be a choir with 12 members”* |  |

**Additional information**

* This application is for **cash collections only**
* The FRSB is the sole public-facing self-regulator for fundraising in the UK. For more information about how the FRSB works and the benefits of being a member, please visit [www.givewithconfidence.org.uk](http://www.givewithconfidence.org.uk/)

I have read and understood the WYCA charity policy which applies to charity collections at WYCA managed bus stations and, if granted permission, agree to enter into the indemnity in the form attached to this application.

( ) Yes ( ) No

Signature:

Date:

Name (please print):

Please send this form to [elizabeth.simpson@westyorks-ca.gov.uk](mailto:elizabeth.simpson@westyorks-ca.gov.uk) with the completed indemnity form

Or post to:

FAO Elizabeth Simpson

Facilities and Assets

West Yorkshire Combined Authority

Wellington House

40-50 Wellington Street

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