



# CENTRAL BAPTIST ASSOCIATION

Bedfordshire, Buckinghamshire, Hertfordshire, North Buckinghamshire, Northamptonshire

walking together in Ministry and Mission

Treasurer – Mrs Karen Hopkins

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## COMMUNITY MISSION GRANT APPLICATION FORM

Church (Name & Address): \_\_\_\_\_

Details of proposed initiative:

Aims & objectives:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Plan:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Timetable:

\_\_\_\_\_

Total Cost of Initiative: £\_\_\_\_\_ Amount requested from CBA: £\_\_\_\_\_ (£500 max)

Annual Accounts attached

Endorsement by Church: Minister / Church Officer \_\_\_\_\_

When complete please return to the Association Treasurer at the address or email above.

Office Use: Date Received \_\_\_\_\_ Date approved \_\_\_\_\_ Payment Reference \_\_\_\_\_