

GOVERNMENT OF GIBRALTAR

APPLICATION FOR ALLOCATION OF A FLAG DAY

Charity Name:				
Registered Number:				
Address of Charity:				
Name of person making the application on behalf of the Charity:				
Relationship of the person making the application to the Charity (e.g. Secretary):				
Address of the person making the application:				
Daytime Contact Telephone:				
Email address:				
Venue(s) collection will be held:				
Piazza Cathedral of St Mary the Crowned Morrisons				
Convent International Commercial Centre (ICC)				
Year of last audited accounts delivered to the Charities Commission at the Supreme Court:				
Are you requesting a specific date: YES NO				
If so, what is your preferred date:				
Signature of person making the application:				
Date:				

FOR OFFICIAL USE

Date received:			
Name of Officer:			
Signature of Officer:			
Approved:	YES	NO	
Date allocated:			
Permits required:			