

**NORMANDY VETERANS LIBOR FUNDING
APPLICATION FORM**



This form is intended for genuine British veterans of the Monte Cassino Campaign, who wish to return to the battlefields in Italy to commemorate future anniversaries which fall 17th-18th of May. Applications for this year's funding can be made in advance or retrospectively, but must be received before 13th December 2019.

Please write clearly in black ink and keep a copy of your completed form for your records. If you have any questions about the application process, please telephone the D-Day Revisited team on 01244 531 765 and we'll be happy to help.

Once completed, please return this form to:

D-DAY REVISITED
The Armoury Building
Hawarden Aviation Park
Flint Road
Chester
CH4 0GZ

For office use only:

WHO IS D-DAY REVISITED?

D-Day Revisited was first established in October 2008 for the primary purpose of funding a 65th anniversary visit by British Armed Forces veterans to the Normandy Landings Sites and surrounding region. Now a registered Charity, we aim to run similar pilgrimages each year giving veterans the opportunity to make that journey and remember their fallen comrades.

In addition to its primary attention towards the D-Day Landings and the Normandy Campaign, D-Day Revisited has been appointed by Her Majesty's Treasury to establish and operate a system through which WWII veterans can receive funding to help with the travel and accommodation costs of a commemorative visit to the Cassino region for the 75th anniversary in May 2019.

WHO CAN APPLY AND HOW MUCH MONEY WILL BE OFFERED?

Both veteran groups and individual veterans residing in the United Kingdom are invited to apply for LIBOR funding.

Veteran applicants are asked to declare if they are travelling with a companion or carer. Applications are generally limited to a veteran plus one; however in special circumstances we understand a third person may be required for extra assistance and this will be dealt with on a case by case basis. Veterans who wish to travel with two carers or companions, please telephone us directly on 01244 531 765.

This year successful applicants will receive **£1000 per person** travelling.

We will let you know directly whether your application has been successful within 10 working days of receipt. A cheque will then be sent to successful applicants by first class post. Please advise to which applicant we should make the cheque payable. If the cheque is to be made payable to a group member who is not a veteran of Her Majesty's Armed Forces then we require written confirmation from the veteran giving us permission to do so.

1. ARE YOU TRAVELLING IN A GROUP OR AS AN INDIVIDUAL?

Group Individual

If you are travelling within a group, please state the name of your organisation:

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2. CONTACT DETAILS FOR THE PERSON ARRANGING THE VISIT.

Title Full name

Postal address

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.....

.....

Email address

Date of birth

Telephone

Mobile

3. HOW MANY PEOPLE ARE GOING ON THIS VISIT?

4. WHAT STAGE HAVE YOU REACHED WITH YOUR TRAVEL ARRANGEMENTS?

The visit has already taken place Start date of visit

We have booked but not travelled yet Start date of visit

We have not booked the visit yet Expected start date

5. TRAVEL DETAILS

If you have already made your travel arrangements we request you make copies of your hotel and transport invoices and send these to us so that we can properly verify your application.

6. VETERAN DETAILS

Please use this part of the form to give details of all veterans going on this visit to Normandy. An additional page is enclosed and can be photocopied should your application be on behalf of multiple veterans.

Lead person's name No. of additional sheets

VETERAN DETAILS	
Full name	Date of birth
Postcode	Service no.
Rank	Regt. & Unit
Period of Service 19 ... to 19 ...	Approx. date of discharge
COMPANION DETAILS	
Full name	Date of birth
Postcode	Relationship to veteran

Lead person's name

No. of additional sheets

VETERAN DETAILS

Full name Date of birth

Postcode Service no.

Rank Regt. & Unit

Period of Service 19 ... to 19 ... Approx. date of discharge

COMPANION DETAILS

Full name Date of birth

Postcode Relationship to veteran

VETERAN DETAILS

Full name Date of birth

Postcode Service no.

Rank Regt. & Unit

Period of Service 19 ... to 19 ... Approx. date of discharge

COMPANION DETAILS

Full name Date of birth

Postcode Relationship to veteran

7. PAYMENT

To meet our responsibilities, payments should be made to the veteran applicant. In circumstances where it is preferable for payment to be made to a group leader or family member, we require written permission from the veteran/veterans in question.

If applicable, this should be enclosed with your application form.

GRANT AGREEMENT

I confirm that, to the best of my knowledge, all the information in this application form and any enclosures is true and correct. I understand that D-Day Revisited may ask for additional information at any stage of this process to accompany our application.

I agree that any LIBOR funding we receive will be used exclusively for the purposes set out in this application.

If any persons named in this application form do not go on the visit, I will notify D-Day Revisited and if requested will return their share of the grant money. I understand that D-Day Revisited may withhold a grant or require repayment in whole or in part if I fail to keep this agreement.

Signature of the person arranging the visit (named in question 2)

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Print name Date