## THE SCOTTISH ROCK GARDEN CLUB EXPLORATION AWARD APPLICATION FORM

PERSONAL DETAILS	Mr/Mrs/Miss/Other (Please State)	
Surname	First Name	
Address		
Postcode	Email Address	
Date of Birth	Contact Tel No	
Membership of relevant Societies,	e.g. SRGC, AGS, RHS:	
Other Participants:		
PROJECT DETAILS		
Name of Trip	Dates	
Aims		
Benefits to SRGC		
Names of Other Organizations to which application(s) made		
Amounts Requested	Amounts Received	

**Relevant Experience/Qualifications** 

Support/Invitation from Horticultural/Botanical O	rganization
CONCISE ACCOUNT OF PROJECT include	ling Locations to be Visited and Details of
Costs	
Total cost of expedition to you	£
Amount of Award applied for from the SRGC	£
Personal Contribution(s)	£
All recipients of grants travelling to other countries regarding conservation and by the CITES regulation your agreement to this clause.	· ·
I the applicant will return the award to the SRGC is taking place, or my being unable to take part. As the return any surplus funding to the SRGC in the event the award for the Erro dition	e applicant for an award I will
the award for the Expedition. If my application is successful I will, within 12 mon	ths of the Expedition, submit to the
SRGC a report on the Expedition; which report (in lished by the SRGC on its website or in its Journal.	
Your signature below confirms your agreement to t	these clauses.
Signed: Date:_	
Completed Application Fig. 4.3.	
Completed Application Forms to be returned to: Carole Bainbridge, Luckie Harg's, Anwoth Rd, Ga	tehouse of Fleet, Castle Douglas DG7 2EF

Email: exploration@srgc.net