**NAM 2024: CARERS’ GRANTS**

**Application Form**

The RAS is offering a limited number of grants for carers (that can be used for the 2024 National Astronomy Meeting (NAM 2024), to give eligible delegates support for the **additional costs** of paying for care when attending the conference.

Applications may be submitted at any time, up until 1700 BST on 27th June 2024 (for NAM), and after this deadline confirmation of eligibility will be given within one weeks. Payment will be made on completion of a short form following attendance at the event. Retrospective awards will not normally be considered.

Please see attached notes for further details of the grant.

Please contact awards@ras.ac.uk if you have any queries.

1. **Personal details**

|  |  |
| --- | --- |
| Name (including title)  |  |
| Address  |  |
| Postcode |  |
| Email Address |  |

1. **Details of attendance**

|  |  |
| --- | --- |
| Date(s) of attendance at NAM 2024 |  |
| Reason for attending  |  |

1. **Who do you care for?**

|  |  |
| --- | --- |
| Name(s) of person/people you normally care for |  |
| Relationship to her/him/them |  |
| Care arrangements normally used  |  |
| Reasons for additional care requested |  |

1. **Support requested**

|  |  |
| --- | --- |
| Type of additional care requested |  |
| Total amount of claim up to £250 |  |

Please specify if you have requested or obtained support for these costs from any other source

|  |  |
| --- | --- |
| Source |  |
| Amount |  |

1. **Payment details**

For all payments:

|  |  |
| --- | --- |
| Bank name:  |  |
| Account name: |  |
| Bank address  |  |

For UK payments:

|  |  |
| --- | --- |
| Sort code: |  |
| Account number: |  |

For European payments:

|  |  |
| --- | --- |
| SWIFT/BIC code: |  |
| IBAN number: |  |

For US Banks:

|  |  |
| --- | --- |
| ABA or FEDWIRE number: |  |
| Account number: |  |

For payments to other countries:

|  |  |
| --- | --- |
| Bank ID (SWIFT/BIC code): |  |
| Account number: |  |

**I understand that payment will be made once I have returned a short report following attendance at the event. I confirm that the above details are correct.**

**Signature Date**

*(Please type or scan name if returning this form electronically)*

Please return this form to awards@ras.ac.uk