**Grow Your Idea 2 Application Form**

Your full name

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Your company/organisation name (if applicable)

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Company/Organisation website (if applicable)

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Your email address (required)

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Your contact telephone number (required)

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Please confirm you live in the Borough of Waltham Forest.

Yes No

Your Postcode

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Please confirm you over 18 years of age.

Yes No

Please confirm you can start and run your activity between April-December 2018.

 Yes No

Where did you hear about Grow Your Idea 2?

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Tell us about your self and your organisation (if applicable) 200 word max

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Tell us about your idea. What is it? Who is it aimed at? 200 word max

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What impact would your idea have on your target audience? 200 word max

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