# Partner Search Form

Please do not write more than two pages.

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| Identification of the applicant | |
| Name of the organisation | Ballina Twinning Committee |
| Registered address (street, city, country) | C/o Ballina Tidy Towns, Main St., Ballina,  Co. Tipperary. |
| Telephone / Fax |  |
| Website of the organisation |  |
| Name of the contact person | Jim Gallagher, Chairperson |
| Email/Telephone of the contact person | [Rita.gallagher@ul.ie](mailto:Rita.gallagher@ul.ie) |
| Short overview of your organisation (key activities, experience) | Ballina Tidy Towns & Tourism Committee – A voluntary organisation involved in the promotion of tourism, enhancement of the town and working with the youth to promote involvement in community activities |
| Description of the project | |
| Strand, Measure in the framework of “Europe for Citizens” Programme (e.g. European Remembrance; Civil Society Project; Town Twining)? | Town Twinning |
| Timetable of the project | 2016 |
| Short description of the project, including its aims | Cultural interaction between a tourism town in Ireland and similiar tourism European town.  Impact – Cross border events, e-tourism, breaking down barriers and an opportunity for youth to get involved in European affairs. |
| Role of the partner organisation in the project | * Exchange of cultural information * Sharing of learning and knowledge * Organisation of cultural events and conferences involving youth, senior citizens and people with disabilities. |
| Comments from the applicant | Mutual benefit to both partners. |