

GRANT COUNTY TOURISM GRANT - FEBRUARY, 2019

Application

Introduction: This is a competitive grant program designed to assist nonprofit business or volunteer managed organizations seeking supplementary support. The purpose of the grant program is to assist Grant County based organizations in promoting a positive image to potential visitors, generate overnight visits, extend visitor stays, create a desire to return, and enhance the tourism industry through creative innovative planning and marketing. Public access to some aspect of the project/event is a requirement of the grant, however admission may be charged. Consideration will be given to new and expanding projects, festivals, sports tournaments, conventions, cultural arts, and special events benefiting Grant County and the region. **Incomplete applications will not be accepted.**

Organization Name: _____

Address: _____

City, State, Zip: _____

Contact Person: _____

Phone Number: _____

Email Address: _____

Purpose of Organization: _____

Tax Filing Status: _____ **Federal Tax ID Number:** _____

Category (check one): ONE/New Project Development _____ or TWO/Social Media Marketing _____

TOTAL AMOUNT REQUESTED: \$ _____

Signature: _____

Date: _____

FUND ELIGIBILITY CHECKLIST

*****Please complete this section before proceeding*****

- _____ Application is submitted by a nonprofit business or volunteer organization.
- _____ This project will show a favorable impression of Grant County and the region.
- _____ Total Grant Amount Requested from 'Budget Form' does NOT exceed 50% of matching costs

- _____ This project/organization has received previous grants from the Grant County Tourism Resource Committee.
- _____ Number of previous grants received: _____ Total amount of previous grants: \$ _____

Applicants who have met the above criteria for funding may proceed with the remainder of the application. Assistance will be given to anyone requesting it by calling the Grant County UW-Extension office at (608) 723-2125.

CATEGORY ONE: New Project Description Page – Fill out as requested below

CATEGORY TWO: If requesting funds for multiple projects/events, please list each by number under b, c, d, e,

On a separate piece of paper, please respond to the following questions. Event/Project description should not exceed four pages.

- a) Briefly describe the purpose of your organization; what your organization provides to the community; the group of people you are targeting.
- b) Describe your event/project: Be sure to include who, what, where, when, and how activities will take place.
- c) Explain how your event/project benefits the community and your organization. Specify whether your event/project is a first time event/project, annual event/project or an on-going program.
- d) What geographic area(s) are you bringing participants from?
- e) Explain the resulting impact on your event/project if the requested funding is denied.
- f) Please complete the appropriate attached budget form(s). Budgets not provided on this form will not be considered. Budget reflected should be for the project only.

Please review and adhere to the criteria for funding grant requests as found in the guidelines. Also carefully note the ineligible organizations and programs that will not be considered.

If you have any questions please call the Grant County UW-Extension Office at (608) 723-2125 or email GrantProgram@co.grant.wi.gov.

Deadline: IN THE OFFICE before 4:00 pm on WEDNESDAY, FEBRUARY 6, 2019

SUBMIT APPLICATION BY EMAIL *or* MAIL:

Email to: grantprogram@co.grant.wi.gov

Mail to:

Grant County Tourism Grant
UW Extension Grant County
916 East Elm Street, Suite A
Lancaster, WI 53813

Budget Forms (Select category form as appropriate)

Note: You may NOT submit a project or event in both categories.

CATEGORY ONE – New Project/Event Budget Form	
Project/Event Name:	
Revenues	Amount
Other Grants/Donations/Sponsorships:	\$
In-Kind (total volunteer hours _____ X Value per hour \$_____ =)	\$
Event/Project Revenue (i.e. ticket sales, vendor fees, etc):	\$
Total Revenues:	\$
Expenses	
Direct Event/Project Expenses (Excludes administrative costs)	\$
Profit (loss)	\$

Total Grant Request:	\$
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Describe economic impact including number of visitors, number of anticipated room nights generated, and other expected impacts. Please explain how you arrive at these estimates.

Category Two forms on next page.

CATEGORY TWO – Social Media Marketing/Advertising	
#1	Project /Event Name:
	Project Date(s) or Date Range:
	Description of marketing strategy including social media type, other organizations or businesses involved:
	Total event/organization amount budgeted to social media: \$
	Total Grant Amount Requested <i>(Not to exceed 50% of budgeted amount)</i> \$

CATEGORY TWO – Social Media Marketing/Advertising	
#2	Project /Event Name:
	Project Date(s) or Date Range:
	Description of marketing strategy including social media type, other organizations or businesses involved:
	Total event/organization amount budgeted to social media: \$
	Total Grant Amount Requested <i>(Not to exceed 50% of budgeted amount)</i> \$

Please duplicate this sheet if you are submitting a proposal that includes additional projects/events.