



TOURISM SPECIAL EVENT GRANT APPLICATION

Dunn Area Tourism Authority Event Grant Application

The purpose of the Dunn Area Tourism Authority Special Event Grant is to aid in the promotion, PR, and marketing of tourism driven events in the Dunn, NC. area. Dunn Area Tourism Authority welcomes proposals from both profit and non-profit, that are designed for the purpose of attracting overnight visitors to the city of Dunn, NC. Any organization wishing funding support from the DATA must fill out the Special Event Funding Request Form and Budget Form completely. Applications will be reviewed and considered, and the applicant may be invited to present an in-person, formal presentation of the event.

1. Applying Organization or Business: _____

2. Organization or Business Located in Dunn ? __Yes __No*

3. *Name of Partner Organization or Business Located in Dunn:

4. Project Director: _____

5. Mailing Address: _____

6. City: _____ State: _____ Zip: _____

7. Work Phone: (____) _____ Fax: (____) _____

Cell Phone: (____) _____

8. Email: _____

9. Name of Event: _____

10. Date(s) of Event _____

11. If you expect attendees to arrive earlier or stay later than the date(s) of the event, please describe the realistic number of nights you expect out of market visitors to be here: _____

12. Amount of Grant Request: \$ _____

13. List the requested marketing, pr, or promotional expenses and amounts that will be covered by this grant (*attach additional sheets if necessary*).

_____ Amount \$ _____

_____ Amount \$ _____

_____ Amount \$ _____

_____ Amount \$ _____

_____ Amount \$ _____

_____ Amount \$ _____

_____ Amount \$ _____

_____ Amount \$ _____

_____ Amount \$ _____

14. Description your event. Description must include all activities, purpose, outline needs assessment and intended results of the event (*attach additional sheets if necessary*).

15. Will this be an annual event? Yes* _____ No _____

***Include a plan documenting the expected timeline and what steps will be taken to ensure the event's financial viability once Dunn Travel & Tourism Event Grant funding is no longer available.**

16. Anticipated total number of event attendees (local & out of County): _____

17. Estimated number of out of County event attendees: _____

18. Please describe how the Organization/Business will quantify the number of out of County visitors at the Event: _____

19. Total Event Budget: \$ _____ (*attach a complete budget for the project, including details of income sources, expenditures including, but not limited to, marketing, promotion, administration, salaries, charitable donations and anticipated profit*)

20. Please describe your plan for marketing the event to ensure it is successful as well as reaching potential visitors traveling outside of the area .

21. Does the Organization/Agency receive any tax funding? ___Yes* No___

*How much? \$_____

22. What other sources of funding and amounts does the Organization/Agency receive (other grants/sponsors/counties)? *(attach additional sheets if necessary)*

a. Funding source: _____ \$ _____

b. Funding source: _____ \$ _____

c. Funding source: _____ \$ _____

d. Funding source: _____ \$ _____

e. Funding source: _____ \$ _____

f. Funding source: _____ \$ _____

23. Have you received an Event Grant in the Past? ___Yes ___No

24. Name and Address to Appear on Reimbursement Check:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

I certify that the information I have provided is true and correct to the best of my knowledge.

Authorized Signature of Applicant: _____

Print Name of Authorized Applicant: _____

Date: _____

It is required to send a completed W-9 for the organization with each application. If grant is awarded applicants are required to list Discover Dunn on all advertising.

Return completed form and attachments to:

Cristy Bullock, Executive Director

Dunn Area Tourism Authority

103 E. Cumberland St.

Dunn, NC 28334

For Office Use Only

Date received by Dunn Area Tourism Authority: _____

Received By (Please Print): _____



CONTACT

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