

The City of Brookings Visitor Promotions Committee

EVENT FUNDING APPLICATION FORM

To attract out-of-town visitors for events with economic impact.

GENERAL APPLICANT INFORMATION:

Legal Name of Applicant Organization		Application Date	
Nature or purpose of organization		State Tax ID/Tax Exempt #	
Address	City	State	Zip Code
Contact Person & Title	E-mail Address		Telephone

GENERAL EVENT INFORMATION:

In the space provided, describe the event for which you propose to use requested City of Brookings Visitor Promotions Committee event funds:

Event dates:	Site/location and city/state of previous year's event:		
At the date of this application, is Brookings the confirmed location for this event?	Is this the first time this event has been held in Brookings?		
Total revenue budgeted for this event:	Total expenses budgeted for this event:		
Projected daily attendance for event:	Percent of attendance from out of town:		
Projected hotel rooms used for event:	Percent of attendance local:		
Amount requested from Visitor Promotions Committee:	Date funds are needed:		
Major event sponsors/funders:	Amount:	Inkind or financial? (Describe if inkind)	Funding status:
Is this the first request for Visitor Promotions to fund this event?	Date(s) of previous requests:	Am't previously rec'd:	

ADDITIONAL INFORMATION: The following information must be attached to complete the application.

- EVENT BUDGET.** Outline major elements of revenue and expense.
- EVENT SCHEDULE.** Outline the major activities, participants, and venues.
- TARGET AUDIENCE.** Outline your target audience.
- EVENT MGMT.** Outline how, when, and who will plan and carry out the event. Include marketing and promotion plans.
- SPONSOR RECOGNITION.** Outline how the City of Brookings Visitor Promotions Committee will be recognized for the sponsorship.
- ATTENDANCE TRACKING.** Outline plan for tracking attendance at the event.

Only completed applications will be considered for funding

SIGNATURE OF APPLICANT:	Date:
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ORGANIZATIONAL USE:

Date Request Approved:	Approved By:	Amount:	Check # & Date:
Date Request Denied:	Denied By:	Reason:	

RETURN TO: BROOKINGS CONVENTION & VISITORS BUREAU

PO BOX 431, 2308 Sixth St., Brookings, SD 57006