



Event Grant Application

1. Applying Organization: _____
Check Here if Organization is Applying as a Pass-Through Organization:

2. Project Director _____

3. Mailing Address _____

4. Phone (_____) _____ Fax (_____) _____

5. Email _____

6. Name of Event: _____

7. Date(s) of Event _____

(If you expect attendees to arrive earlier or stay later, please describe the realistic number of nights you expect out of market visitors to be here) _____

8. Amount of Grant Request \$ _____

List the requested expenses and amounts that will be covered by this grant.

_____ Amount \$ _____

_____ Amount \$ _____

_____ Amount \$ _____

_____ Amount \$ _____

_____ Amount \$ _____

9. Description of this year’s event. Description must include all activities, purpose, outline, needs assessment and intended results of the event. Attach additional sheets if necessary.

10. Will this be an annual event? Yes No
 (If yes, include a plan documenting the expected timeline and what steps will be taken to ensure the event’s financial viability once Visitor Bureau grant dollars are no longer available.)

11. Anticipated total number of event attendees (local & out of market):_____

12. Estimated number of out of town event attendees: _____

13. Please describe how the Organization/Agency will quantify the number of out-of-market visitors at the Event/Festival: _____

14. 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)

15. Does the Organization/Agency receive any tax funding? Yes No

If yes, how much? \$_____

16. Does the Organization/Agency receive funding from a foundation(s)? Yes No

If yes, how much? \$_____

17. Have you received an Event Grant in the Past? Yes No

18. Name and Address to Appear on Reimbursement Check:

19. Is proof of non-profit status attached? (must be a **final** determination from the Internal Revenue Service)

Yes No

I certify that the above information is true and correct to the best of my knowledge

Authorized Signature of Applicant

Date

Return completed application to:

**Grants Administrator
Outer Banks Visitors Bureau
One Visitors Center Circle
Manteo, NC 27954**