



Currituck County Travel & Tourism
Application for Support of Funds
Events Sponsored by Non-Profit or Not-For-Profit Organizations

Non-Profit/Not-For-Profit Organization Name: _____

Contact Person: _____

Phone Number: _____ E-mail: _____

Mailing Address: _____

Note: A separate application must be completed for each event. Applications are required to be submitted during the fiscal year that funds are requested.

Title and Purpose of Event: _____

Location of Event: _____

Date of Event: _____

Estimated Number of Attendees (*Use attendance number from the previous year; if this is a first year event, estimate the number of people expected to attend*): _____

How will proceeds from the event be spent? _____

Total Funds Requested* (see list below for maximum funding amount): \$ _____

***All applicants will be considered first year applicants as of July 1, 2009)**

Level I - Attendees, up to 100 people:	\$1,000 first year of funding \$700 second year of funding \$400 third and all subsequent years of funding
Level II - Attendees, 100 to 300 people:	\$2,000 first year of funding \$1,000 second year of funding \$500 third and all subsequent years of funding
Level III - Attendees, 300 to 500 people:	\$2,500 first year of funding \$1,500 second year of funding \$1,000 third and all subsequent years of funding
Level IV - Attendees, 500+ people:	\$5,000 first year of funding \$3,500 second year of funding \$2,000 third and all subsequent years of funding

Describe how funds will be spent. You must account for the exact dollar amount you are requesting. Attach copies of contracts, insertion orders, or written estimates from media sources to this application.

Media Source: _____
Funds Requested: \$ _____ Publication Date(s): _____
Ad Size: _____

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Other Project Expenses (examples: printing of posters or flyers, electronic-marketing):

Vendor: _____
Item(s): _____
Funds Requested: \$ _____

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Item(s): _____
Funds Requested: \$ _____

Explain how your event will attract visitors and tourists from outside Currituck County and enhance the long-term growth of the travel and tourism industry (attach additional sheet if necessary):

Initialing and signing below signifies that you have read and agree to the following statements:

I understand that the Currituck County Tourism Advisory Board must approve my application. _____

I have read and agree to abide by the Support of Funds Program Guidelines. I acknowledge that by failing to comply with any of the program's guidelines, I will forfeit the awarded funds. _____

I understand that I may apply for a maximum of \$5,000 per fiscal year. (*See levels of available funding listed on page 1 of this application.*) _____

I understand that no funds will be awarded to reimburse me for advertising money already spent. _____

I understand that the Travel and Tourism Department Director or her designee must pre-approve all media sources, materials, content of the ad(s) prior to publication, and any deviation from the approved application. _____

I understand that all publications and ad contents must follow the guidelines of the Travel and Tourism Department. This includes no nudity, drunkenness, lewd behavior, or profanity in the promotional materials or at the event. _____

I will credit the **Currituck County Department of Travel and Tourism** in all advertising funded through the Support of Funds Program. (Sample wording: "This ad sponsored in part by the Currituck County Department of Travel & Tourism." _____

I will submit tear sheets and copies of printed materials within 60 days following my event. _____

I agree to refund Currituck County for Support of Funds monies spent should the event be cancelled for any reason other than inclement weather (e.g.: Applicant fails to meet the requirements of a Special Use Permit; applicant chooses to cancel the event.) _____

I will submit a written summary (at least 100 words in length) describing how the Support of Funds Program assisted my event in attracting attendees from outside of the area (include the approximate total number of attendees). I will submit this summary to the Department of Travel & Tourism Director within thirty (30) days after my event. Failure to submit a summary in the allotted time may have an impact in the applicants' future awarding of funds. _____

Notes:

- **Applications must be received at least thirty (30) days prior to the Tourism Advisory Board meeting in which the application will be reviewed. Applications are reviewed ONLY at the Board's quarterly meetings (November, February, May, and August).**
- **Funds are awarded annually per APPLICANT, not per event.**

Applicant Signature

Applicant Printed Name & Title

Date

Address & Telephone

County Manager Signature

Date

APPROVED BY THE TOURISM ADVISORY BOARD

Chairman

Date

Return application to:
Currituck County Department of Travel and Tourism
Post Office Box 39
Currituck, NC 27929
Phone: 252-232-2708

Revised June 1, 2009 – Tourism Development Authority