

Application for Tourism Funds - Activity Support

Name of Organization: _____

Registered Corporate Agent: _____

Organization Address: _____

Activity Name: _____

Amount of Request: \$ _____ Date of Activity: _____

Thank you for your interest in promoting Sutherlin. The Tourism Room Tax Advisory Committee will be reviewing all funding requests and scoring them against an evaluation tool. The committee is heavily invested in activities that attract people from over 50 miles away, and include an overnight stay in the area. It is also important to track the results and give a report back to the Committee post-event.

Please answer the following items:

1. Provide a short written narrative of your event outlining the needs, uses, and benefits of supporting your event/activity. The use of these funds is specifically targeted towards tourism promotion of Sutherlin. Indicate in the narrative how the TRT funds will be used. Describe how results will be tracked.
2. Describe the impact on overnight stays in Sutherlin resulting from your event.
3. Provide verification of your non-profit status and a list of your organizational leadership.
4. Submit a project/activity or FY operating budget as approved by your leadership.
5. What is the marketing plan for this event?

NOTE I: Your funding request should be accompanied by a narrative that includes an appraisal of the event's impact on Sutherlin's tourism and examples of promotional materials and how the support of TRT will be acknowledged. You may also be asked to present your funding request in person.

NOTE II: If you are seeking funding greater than \$1,000, you must show your budget provides a 50% match. You may appeal for a waiver of the match to the TRT Grant Committee.

NOTE III: The TRTAC expects a short, post-event report (may be done in person or by email), complete with visitor/attendee tracking results and then funds will be disbursed. Should your organization need funds prior to the date of your project/activity, you may make that request as part of your narrative.

Applications should be turned in to the Sutherlin Area Chamber of Commerce and Visitor Center at 1310 W. Central Ave, Sutherlin or mailed to PO Box 1404, Sutherlin, OR 97479

I understand and agree to the terms and conditions of this award should it be granted.

Authorized Signature: _____ Date: _____

Print Name: _____

Title: _____