

JUST SOUTH OF INDY festivalcountryindiana.com

FESTIVAL COUNTRY INDIANA (JOHNSON COUNTY CONVENTION, VISITOR AND TOURISM BOARD) GRANT APPLICATION

Organization information:

Organization/business applying for grant			
Federal ID number			
Indiana tax-exempt number			
Contact person			
Address			
City State Zip code			
Phone			
Email address			
Website address and Facebook URL			
Describe your business/organization			
State your business/organization mission			

List type of grant and total amount requested.

- Marketing grant: \$2,500 (first year); \$1,500 (second year); \$1,000 (third year)
- Festivals and events grant: \$2,500 (first year); \$1,500 (second year); \$1,000 (third year)
- Meetings, conventions, and seminars: \$2,500 (first year); \$1,500 (second year);
 \$1,000 (third year)
- Sports sponsorship: Maximum \$2,500
- Product development: Maximum \$5,000

When awarding grants, we retain the right to award an amount different than the maximum amount.

Project information:

Please note that The Festival Country Indiana/Johnson County Convention, Visitor and Tourism Board grant program is designed to encourage organizations to bring **new** festivals, events, projects and attractions to our area, or to **substantially improve existing ones** (by, for example, turning a one-day event into a two-day event, by adding quality entertainment acts to a festival that never had such entertainment, or by adding a travel-worthy selfie spot).

The grants are not intended to pay salaries, pay for maintenance or supplement an organization's general operating expenses.

Name of event (or product)			
City	State	Zip code	
This is: a new festival, ev an existing festiva a new product or an enhancement	al, event, convention attraction.	or sporting event.	

Please describe the event (or product)

Describe how you will market it to potential visitors outside Johnson County

How will you track outside visitation? (One way is to have people offer a prize as they enter, if they provide their name, town, email address and how they heard of it. Another is to record the county number on the license plates of people who drive to the event or attraction

What's the estimated number of people who will come for the event/product?

What steps will you take to work with Festival Country Indiana's partner hotels and B&Bs, as well as let your visitors know about these lodging options? (Visit www.festivalcountryindiana.com/stay to find our partner hotels and B&Bs. Examples of partnership include putting a link to our lodging webpage on your event or attraction webpage, and providing Festival Country Indiana with copies of emails in which you reached out to lodging partners about how you could work together).

How many hotel rooms do you estimate will be booked within Johnson County?_____

Summarize what you propose to use the funding for.

If this is a sporting event, what age level is the event for?

____ Middle school

____ High school

____ College

____ Adults

If this is a sporting event, what type of event is it?

- _____ Local, within Johnson County
- _____ Regional, within the Indianapolis area
- ____ State
- ____ Midwest
- ____ National

____ International

On behalf of the organization identified on this application, I certify that this application meets the eligibility requirements for Johnson County's tourism promotion grant and that the information entered is true and accurate.

I understand that the grant may provide up to 50 percent of the total costs, not to exceed the grant cap amounts, that no in-kind contributions may be included in the match, that no grant will be awarded to an event or project already completed, and that the completed promotional material must acknowledge this grant by use of the Johnson County tourism logo. I also understand that all documents and written evaluation of this project must be submitted to the director of tourism within 60 days of when the event or product was completed, or by December 15, of the year the event occurred or product was developed, whichever date comes first, and that materials not submitted within the 60-day timeframe are subject to the CVT reducing the reimbursement to the corresponding organization.

Signature_____ Date_____

Title_____