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Event Grant Application

1. Applying Org Check Here	ganization: if Organization is Applying as a Pass-T	hrough Organization:	
	tor		
3. Mailing Addı	ress		
4. Phone (_)	Fax ()	
5. Email			
6. Name of Eve	nt:		
7. Date(s) of Ev	rent		
	ttendees to arrive earlier or stay later, p		
8. Amount of G	rant Request \$		
	List the requested expenses and amou	nts that will be covered by this grant.	
		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):
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. What other sources of funding and amounts does the Organi grants/sponsors/counties)? (Attach additional sheets if necessary)		cy receive (other	
Funding source:	\$		
Funding source:	\$		
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 determ	nination from	n the Internal Rev	venue Service)
Yes No			
I certify that the above information is true and corr	ect to the bes	st of my knowled	lge
Andrewin d Girmon of A. 1		D	
Authorized Signature of Applicant		Date	

Return completed application to:

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