



2020 APPLICATION FORM

Please send completed application to
 jeanm@amescvb.com
 Ames Convention & Visitors Bureau
 1601 Golden Aspen Dr.; Suite 110
 Ames, IA 50010

Name of Event/Activity: _____ Date Submitted: _____

Event/Activity Date(s): _____

Location of Event/Activity: _____

Type of Event: Cultural Activity Recreation Educational Entertainment Other

Sponsoring Organization: _____

Contact Name: _____

Title/Position: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____ Email: _____

Website: _____

PROGRAM SUMMARY

1. Has this event/activity received ACVB Community Grant funds in the past?

No Yes: Amount _____

2. Has this event/activity been held in the past? In Ames before?

No Yes: When? _____

Is this an annual event/activity? No Yes

3. Estimated number of participants and attendees this event/activity will bring to Ames:

Participants _____ Local Attendees _____ Out-of-town Attendees _____

Applications **must be received** by noon Friday, October 11, 2019

PROGRAM SUMMARY *(continued)*

4. Provide a general overview or description of the event/activity in the space provided.

5. Who is expected to attend this event/activity?

PROGRAM SUMMARY *(continued)*

6. What aspects of the event/activity help to improve the quality of life for Ames residents?

7. Will the event/activity encourage others to travel to Ames or enhance their visit while they are in the area?

8. What is the most exciting component of the event/activity?

PROGRAM SUMMARY *(continued)*

9. How will the grant funds enhance your event/activity?

10. If you do not receive funding, how will your event/activity be impacted?

11. How and where will this event/activity be promoted?

PROGRAM SUMMARY *(continued)*

12. BUDGET FOR THIS EVENT

Please list all sources and amounts of funding, including funding from your own organization as well as additional grants and sponsorships:

1.	
2.	
3.	
4.	
5.	
Total:	

In the spaces below, please provide the expenses* for your event/activity:

Vendor	Item	Cost
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
<i>*Copies of receipts will be required with final report as proof of expenditures.</i>		Total:

Which lines within the budget are you seeking funding for?

How much total funding are you seeking for these items? \$ _____

Applications **must be received** by noon Friday, October 11, 2019

OBLIGATIONS

All marketing materials promoting the event or activity must include the Bureau logo, telephone number, website and the verbiage “Supported by the Ames Convention & Visitors Bureau Community Grant Program” as appropriate.

Grant recipients are required to participate in the Bureau’s **CYtes** of Ames promotional track program, marketing their event/activity through the Bureau’s website and additional marketing materials.

50% of the grant is available upon request, however, a final report form must be completed within 60 days of completion of the event or activity to receive the remaining grant amount. Failure to comply with the obligations will prohibit the organization from receiving a grant in the future.

ACKNOWLEDGMENT

I acknowledge that I have read and understand the application materials and requirements as noted in the grant application process. I certify that all statements made in this application are true and correct. I agree and will comply with the requirements indicated in the grant.

Signature

Date

Print Name

FOR OFFICE USE ONLY:

Organization Funding	2017	2018	2019

Thank You for completing the Grant Application!