



2022 APPLICATION

PLEASE SEND COMPLETED APPLICATION TO:
jeanm@amescvb.com
Ames Convention & Visitors Bureau
1601 Golden Aspen Drive; Suite 110
Ames, IA 50010

Name of Event: _____ Date submitted: _____

Date of Event: _____

Location of Event: _____

Type of event: Cultural Recreation Educational Entertainment Other

Sponsor Organization: _____

Contact Name: _____

Title / Position: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Website: _____

PROGRAM SUMMARY

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

NO YES: amount received \$ _____

2. Has this event been held in the past in Ames?

NO YES: when? _____

Is this an annual event? NO YES

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

Participants _____ % Local attendees _____ % Out-of-town attendees _____

PROGRAM SUMMARY *(continued)*

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

5. Who is your expected audience for this event?

PROGRAM SUMMARY *(continued)*

6. What aspects of this event help improve the quality of life for Ames residents?

7. Will the event encourage others to travel to Ames or to enhance the Ames' visitor experience? If so, how?

8. What is the most exciting component of this event?

PROGRAM SUMMARY (*continued*)

9. How will the ACVB Community Grant funds enhance your event?

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

11. How and where will this event be promoted?

PROGRAM SUMMARY *(continued)*

12. BUDGET FOR THIS EVENT

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

<i>Source</i>	<i>Amount</i>
1.	\$
2.	\$
3.	\$
4.	\$
5.	\$
TOTAL:	\$

In the spaces below, please provide your complete event budgeted expenses:

<i>Vendor</i>	<i>Item</i>	<i>Cost</i>
1.		\$
2.		\$
3.		\$
4.		\$
5.		\$
6.		\$
7.		\$
8.		\$
TOTAL:		\$

**Copies of receipts will be required with final report as proof of expenditures*

For which budget line(s) are you seeking funding? _____

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

OBLIGATIONS

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

First time grant recipients will receive complimentary Ames Convention & Visitors Bureau membership, becoming a CYtes of Ames for the year grant is awarded (\$150 value). Repeating grant recipients must retain Ames Convention & Visitors Bureau membership as a CYtes of Ames, paying for the yearly membership fee. 2022 Membership fee is \$150 and good for the entire year. Membership benefits include business listing on ThinkAmes.com, in CYtes of Ames and Iowa State University Guide (print visitors guide), social media promotion, event listings on ThinkAmes.com event calendar, promotional item distribution, and more.

If awarded grant funding, **50%** of the awarded amount is available upon request. A final report form must be completed within 60 days of event completion in order to receive the remaining grant award. Failure to comply with the obligations detailed here will prohibit the organization from receiving a grant in the future.

ACKNOWLEDGMENT

I acknowledge that I have read and I 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

Printed name

FOR OFFICE USE ONLY

<i>Organization funding</i>	<i>2018</i>	<i>2019</i>	<i>2020/2021</i>