

# Festival, Event and Community Events Grant Programs

# **APPLICATION FORM**

PART A - APPLICANT INFORMATION		
Name of Festival or Event:		
Host organization (if different than festival/event):		
Current edition of the festival/event:		
Proposed dates (start/end):		
Contact person and Title:		
Address:		
Tel (main):	(Cell):	
Fax:	Email:	
Website:	Facebook	
Chair or President of the organization:		
Number of full-time paid staff:		

Number of part-time paid staff:	Number of volunteers:
Requested grant: \$determined in Part C)	(Community events grant of \$500 or as

Please ensure your request aligns with Explore St. Andrew's mission to enhance/develop the tourism sector in St. Andrews by focusing on the following objectives:

- Attracting more visitors, particularly during the shoulder season
- Extending the duration of their overnight stays
- Increasing visitor spending

# **ELIGIBLE COSTS**

• Expenses associated with advertising and promoting the festival/event, such as radio advertisements, brochures, posters, magazines and the design and printing of a program. While social media can be included, marketing efforts for the festival/event must extend beyond social media alone.

A **Festival/Event Grant** may not exceed 50% of the eligible costs as per Part C of the Grant Application and are subject to the discretion of the committee

<u>Incomplete</u> <u>applications will not be evaluated</u>.

Please provide the following information on the project for which a grant is being requested. Attach additional sheets referencing the question number. Ensure all questions have been answered. If you are requesting grants for multiple events, please provide a breakdown for each event in the section below.

1.	Description and strategic merit of the festival/event, demonstrating how the festival/event meets the program's objectives and target outcomes Describe any new initiatives that are being undertaken in this year's edition to broaden the appeal of the festival/event.	
2.	Timing of the festival/event outside of or within peak tourism season;	
3.	Ability to generate accommodation stays in the area "heads in beds" to replenish the funding for future years	
4.	Ability to generate food and beverage and/or retail economic impact	

5.	Describe the marketing and promotional strategy, explaining how the festival/event will reach the target audience	
6.	Describe the profile and past performance of the applicant organization. If this is the organization's <u>first application</u> under this program, please attach a copy of the list of contacts for the organizing committee. In addition, please describe the nature/theme/vision of the festival as presented in the most recent edition.	
7.	Has the festival surveyed the provincial event's calendar for other festivals/events that may be competing with this project in as far as having a similar genre, dates, geographical region or performers? If so, please describe which other festivals were identified and how your festival is planning to deal with any perceived or actual competition?	
8.	How will the organization measure the success of their event and the return on investment for EXPLORE ST. ANDREWS?	

# PART C - BALANCED PROVISIONAL BUDGET OF THE FESTIVAL- ONLY REQUIRED FOR GRANTS OVER \$500.00

EXPENDITURES	\$
Advertising & Promotion: Mandatory value	
social media	
radio	
• other	
Print: Mandatory value	
brochures (design and printing)	
posters (design and printing) programs (design and printing)	
programs (design and printing)	
Other promotional costs: Mandatory value	
Please specify	
Below are all approximate costs:	
Office costs	
Salaries & benefits	
Stationary, mailings, courier	
Travel/meetings	
Telephone/Fax and other related costs	
Artist fees (performance, travel & accomodations)	
Rental of equipment	
Technical/technician	
Rental of venue	
Other production expenses (please specify)	
Security	
Insurance	
Total Expenditures (must equal total revenues)	
Total Expenditures (must equal total levellues)	
	\$

REVENUES	
Federal government grant (specify):	
Provincial government grant (specify):	
Municipal government grant (specify):	
Sponsors	
Private sector contribution	
Financial contribution of applicant organization	
Merchandise/bar/concession's sales	
Ticket sales	
In-kind donations (specify approx. value):	
Rental of premises or venue	
Donation of material	
Volunteer time	
Other (specify):	
Total Revenues: (Must be equal to total expenditures)	
Grant Requested	

NOTE: THE GRANT REQUESTED MUST NOT EXCEED 50% OF THE TOTAL MARKETING BUDGET

### **PART D - DECLARATION**

I hereby agree to provide all requested information as well as any other supporting documents needed to evaluate this application. I understand that my application may be disqualified if it is incomplete.

I recognize that applications are approved subject to availability of funds and that, beyond the provision of a grant, the Explore St. Andrews has no further commitment to the applicant. EXPLORE ST. ANDREWS will not be held responsible for the completion of an activity.

I agree to acknowledge the financial participation of Explore St. Andrews in all publicity related to the activities of the proposed project. Most current EXPLORE ST. ANDREWS logos will be provided if grant is awarded.

I agree that my project will be completed by December 31st of the current fiscal year – unless otherwise permitted by EXPLORE ST. ANDREWS - and that a final report will be submitted to EXPLORE ST. ANDREWS 30 days after the project is completed.

I certify that I have signing authority for the above-named organization, that the Committee/Board of Directors has reviewed and approved this application and that, to the best of my knowledge, the information provided with this application is accurate and complete.

I hereby acknowledge and agree that, if awarded a grant, the name of the grant recipient, the recipient's community, the program name, and the amount of the grant, may be published on the Explore St. Andrews website, Annual Report and/or other public summary.

If successful in receiving a grant from EXPLORE ST. ANDREWS, please issue grant payment to:			
	(paym	ents will NOT be issued to individuals)	
and mailed to the address on the	e application unless otherwise noted.		
Name:	Position / Title:		
Signature:	Date:		

# PLEASE SEND YOUR APPLICATION AND SUPPORTING DOCUMENTS VIA EMAIL TO GRANTS@EXPLORESTANDREWS.CA

## **APPLICANT CHECK LIST:**

- □ Completed, signed, and dated application.
- ☐ Attached documentation (if any).
- □ List of current Committee/Board members, titles, and phone contact.