



**THIS IS THE APPROVED APPLICATION FORM AND MUST BE COMPLETED IN
TOTALITY TO BE CONSIDERED FOR A GRANT**

FULTON COUNTY TOURISM COMMISSION GRANT APPLICATION

1. Contact Information

ORGANIZATION CONTACT INFORMATION:
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Organization Name:	Federal ID #:
Director/CEO of Organization:	Phone:
Email:	Fax:

Organization Mailing Address:

Organization Physical Address:

Name & Title of person submitting application:	Phone:
Name & Title of contact person for this application:	Phone:

TYPE OF ORGANIZATION:☐ **501 C 3** (Attach copy of your IRS determination letter)☐ **GOVERNMENTAL ENTITY**☐ **OTHER (SPECIFY)**

If applicant is other than a registered Not-For-Profit, please tell us who will act as your required fiscal agent. (Include name, title, company name, address, and phone number)

Fiscal Agent Federal Tax ID # (if applicable):

Fiscal Agent Signature (if applicable):

Date:

SIGNATURES ARE REQUIRED

Director/CEO Signature:

Date:

Board Officer Signature (Other than Director/CEO):

Date:

AMOUNT OF YOUR REQUEST:**SUMMARY OF YOUR REQUEST:**

2. Activity Information

Activity Name:
Activity Dates:
Activity Web Address (Social Media Pages, are applicable):
Activity Location:
Describe the Activity:
Purpose of Activity (Include target audience, entertainment, and any other relevant information):

3. Hotel Stay Information

Brief description of information related to overnight stays, increase in food and beverage expenditure:

4. Website Development (event/tourism related) Must include website contract for approval.

Describe the purpose of the proposed website or website enhancement for marketing grant:

5. Marketing Plan - (please attach if applying for numbers 3 or 4); provide a detailed marketing plan which includes local marketing as well as marketing taking place outside Fulton County for which funding has been requested. This includes all types of media, names of publications, stations, web sites with launch dates, ad sizes, copies of ads if available, costs, impressions, audience and any other relevant information. Please note any sponsorship solicitation taken to secure additional funding.

6. Budget - (please attach) a detailed itemized budget for marketing that will be paid for by Fulton County Tourism Commission marketing grant funding.

Grant Applicant Signature:
Organization Name:
Signature:
Date:
Please print name and title of person signing application on behalf of organization:

Please fill out application in totality and return to the address below:

**Fulton County Tourism Commission
822 Main St.
PO Box 1035
Rochester IN 46975
574-224-2666
tourism@rtcol.com**