



# NORTHERN OUTER BANKS

## Currituck County Department of Travel & Tourism Event Grant Application

1. Applying Organization or Business: \_\_\_\_\_
2. Organization or Business Located in Currituck?  Yes  No\*  
 \*Name of Partner Organization or Business Located in Currituck: \_\_\_\_\_
3. Project Director Name (*please print*): \_\_\_\_\_
4. Mailing Address: \_\_\_\_\_
5. City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
6. Work Phone: (\_\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_  
 Cell Phone: (\_\_\_\_\_) \_\_\_\_\_
7. Email: \_\_\_\_\_
8. Name of Event: \_\_\_\_\_
9. Date(s) of Event \_\_\_\_\_
10. Amount of Grant Request: \$ \_\_\_\_\_
11. Have you received an Event Grant in the past for this event?  Yes  No
12. Include separately, as **Exhibit A**, a description of this year's event that must document purpose, schedule with all activities, needs assessment and intended results of the event.
13. Is this or will it be an annual event?  **Yes\***  No

*\*If this is an annual event, include separately, as **Exhibit B**, a plan documenting:*

- *how you expect this event to grow during the eligibility of event grant funding*
- *what steps will be taken to ensure the event's financial viability once Currituck Travel & Tourism Event Grant funding is no longer available.*

14. Event Attendees:

- If you expect attendees to arrive earlier or stay later than the date(s) of the event, please describe the realistic number of nights you expect out of market visitors to be here: \_\_\_\_\_
- Anticipated total number of event attendees (local & out of County): \_\_\_\_\_
- Estimated number of out of County event attendees: \_\_\_\_\_

15. Include separately, as **Exhibit C**, a description of how the Organization/Business will quantify the number of *Out Of County visitors* at the Event/Festival.

16. Total Event Budget: \$ \_\_\_\_\_

17. Include separately, as **Exhibit D**, a complete budget for the project, including:

- *details of additional income sources*
- *expenditures including, but not limited to, marketing, promotion, administration, salaries* (please indicate on the budget which expenditures you expect to be covered by the Event Grant according to the approved expenses list in in the Event Grant Guidelines)
- *any charitable donations*
- *anticipated profit*

18. Does the Organization/Agency receive any tax funding? \_\_\_**Yes\*** \_\_\_No

**\*How much?** \$ \_\_\_\_\_

19. Name and Address to Appear on Reimbursement Check:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

***I certify that the above information is true and correct to the best of my knowledge.***

Authorized Signature of Applicant: \_\_\_\_\_

Print Name of Authorized Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

**What should be included in this application (please initial each item)**

- 1) \_\_\_ Signed and dated Event Grant Application
- 2) \_\_\_ Exhibit A – Description of this year’s event
- 3) \_\_\_ Exhibit B – Plan for event growth and steps that will be taken to ensure the event’s financial viability Event Grant funding is no longer available
- 4) \_\_\_ Exhibit C - Description of how the number of out of County visitors will be quantified
- 5) \_\_\_ Exhibit D – Complete Budget
- 6) \_\_\_ Completed, signed and dated, W-9 for the organization applying for the grant

**Return completed form and attachments to:**

Tameron Kugler, Director  
Currituck Travel & Tourism  
106 Caratoke Highway  
Moyock, NC 27958

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***For Office Use Only***

**Date received by Currituck Travel & Tourism:** \_\_\_\_\_

**Received By (Please Print):** \_\_\_\_\_