



Local Event Grant Application Instructions

Thank you for your interest in applying for the Local Event Grant from the River Falls Chamber of Commerce & Tourism Bureau (Chamber). Funding for this grant comes from room tax dollars collected by the City of River Falls and forwarded to the Chamber to grow tourism in our community.

The purpose of the grant and the funds must be used for:

- Marketing to visitors from nearby towns or further
- Application fees/bid fees/performance fees to bring a special event to River Falls
- A significant addition to an existing event that would not be possible without a grant

We also aim to help local events modernize their advertising tactics by providing expertise. All grant recipients will be invited to have their marketing plan reviewed by Chamber staff for advice and suggestions on how to further the event's marketing reach.

The maximum grant amount is \$1,000.00. The grant cannot be more than 50% of the event marketing budget and the application must be received at least 45 days prior of the event. Applicants must be a non-profit organization and be able to provide a tax ID number. Depending on the nature of the event, insurance documentation may be required.

All successful grant applicants will list the Chamber as a sponsor of the event at the level corresponding to the grant amount and if practical, allow the Chamber to provide event attendees promotional materials inviting them back to River Falls for a non-event visit. Up to 90% of grant funds will be paid with documented marketing expenditures as listed in the application. A short post event review will be required to receive the remaining 10% portion of granted funds.

Please answer the questions on the application as best as you can. The event description and the budgets do not need to be lengthy but should give the review committee and Chamber staff enough information to ensure grant guidelines can be met, insight on how the grant will strengthen the event, and demonstrate some level of a marketing plan.

Upon receipt of the grant application, Chamber staff will review the grant and may contact the applicant for more information. After staff review, the application will be forwarded to the Chamber's Tourism Committee for consideration.

If you have any questions as you prepare the application, please do not hesitate to contact the Chamber or submit your application to Alexandra Pashina, Marketing & Communications Specialist, at alexandra@rfchamber.com or 715-425-2533. You may also mail the application to the River Falls Chamber of Commerce, 215 W Maple St, River Falls, WI 54022.

**RIVER FALLS CHAMBER OF COMMERCE & TOURISM BUREAU
LOCAL EVENT GRANT APPLICATION**

APPLICANT NAME: _____

MAILING ADDRESS: _____

TAX ID NUMBER: _____ **WEBSITE:** _____

CONTACT PERSON: _____ **CONTACT PHONE:** _____

CONTACT EMAIL: _____

DATE OF EVENT: _____ **EXPECTED ATTENDANCE: (LOCAL)** _____ **(VISITOR)** _____

CIRCLE ONE: NEW EVENT EXISITING EVENT

PRIMARY USE OF GRANT (CHECK ONE):

___ ADVERTISING ___ SPECIAL EVENT BID FEE ___ ONE TIME ENHANCEMENT

PLEASE SEE LOCAL EVENT GRANT GUIDELINES FOR ASSISTANCE IN ANSWERING THE FOLLOWING (circle one):

DOES THE APPLICANT AGREE TO MARKETING REVIEW FROM CHAMBER STAFF? Y N

DOES THE APPLICANT AGREE TO SUBMIT A POST EVENT REPORT ON HOW THE EVENT WENT AND DOCUMENT HOW THE GRANT PROCEEDS WERE USED? Y N

DOES THE APPLICANT AGREE TO PROVIDE INSURANCE DOCUMENTATION IF APPLICABLE? Y N

DOES THE APPLICANT UNDERSTAND THE GRANT MUST NOT REPRESENT MORE THAN 50% OF THE ADVERTISING BUDGET? Y N

DOES THE APPLICANT UNDERSTAND GRANT FUNDS WILL BE REIMBURSED ON DOCUMENTED EXPENDITURES AND 10% OF FUNDS WILL BE WITHHELD UPON SUBMISSION OF SHORT POST EVENT REVIEW? Y N

DOES THE APPLICANT AGREE TO OFFER CHAMBER DIGITAL OR PRINTED PROMOTIONAL MATERIALS IF PRACTICAL? Y N

DOES THE APPLICANT AGREE TO GIVE THE CHAMBER EVENT SPONSORSHIP RECOGNITION AT LEVEL THAT IS CUSTOMARY FOR THE GRANT AMOUNT? Y N

1. PLEASE PROVIDE A SHORT DESCRIPTION OF YOUR EVENT.
2. PLEASE PROVIDE A SHORT DESCRIPTION OF YOUR MARKETING PLAN. TYPES OF ADVERTISING TO BE USED, TARGET AUDIENCE, ETC.
3. PLEASE PROVIDE A BUDGET WHICH SHOWS MARKETING AND OPERATIONAL EXPENSES.
4. PLEASE TELL US HOW THE GRANT WILL BE USED TO GROW YOUR EVENT. INCREASED ADVERTISING, ATTRACT TOURNAMENT, BRING SPECIAL ATTRACTION TO EVENT, ETC.

AUTHORIZED CONTACT SIGNATURE: _____ **DATE:** _____

AUTHORIZED CONTACT PRINTED NAME: _____