



CITY OF SUTHERLIN

Application for Tourism Funds/Activity Support

Name of Organization:

Registered Corporate Agent:

Organization Address:

Activity Type/Name:

Amount of Request: \$

Date of Activity:

Thank you for your interest in promoting the City of Sutherlin. The Tourism Room Tax Advisory Committee will be reviewing all funding requests and scoring them against an evaluation tool. The committee is heavily invested in activities that attract people from over 50 miles away, and include an overnight stay in the area. It is also important to track the results and give a report back to the Committee post-event.

Please answer the following items:

1. Provide a short written narrative of your event outlining the needs, uses and benefits of supporting your event/activity. The use of these funds is specifically targeted towards promotion of tourism in Sutherlin. Indicate in the narrative how the TRT funds will be used.
2. Describe how results will be tracked.
3. Describe the impact on overnight stays in Sutherlin resulting from your event.
4. Provide verification of your non-profit status and a list of your organizational leadership.
5. Submit a project/activity or FY operating budget as approved by your leadership.
6. What is the marketing plan for this event?

NOTE I: Your funding request should be accompanied by a narrative that includes an appraisal of the event's impact on Sutherlin's tourism and examples of promotional materials and how the support of TRT will be acknowledged. You may also be asked to present your funding request in person.

NOTE II: If you are seeking funding greater than \$1,000, you must show your budget provides a 50% match. You may appeal for a waiver of the match to the TRT Grant Committee.

NOTE III: The TRT Advisory Committee expects a short, post-event report (may be done in person or by email, complete with visitor/attendee tracking results and then funds will be disbursed. Should your organization need funds prior to the date of your project/activity, you may make that request as part of your narrative.

Applications should be turned in to:

Sutherlin Area Chamber of Commerce and Visitor Center
1310 W. Central Ave.
Sutherlin, OR 97479

Or mailed to:

PO Box 1404
Sutherlin, OR 97479

I understand and agree to the terms and conditions of this award should it be granted.

Authorized Signature:

Date:

Printed Name:

Title:

Sutherlin Application for Tourism Funds/Activity Support

Narratives for items listed on page 1.

1. Needs, uses and benefits of your event/activity:

2. Tracking of results:

3. Impact on overnight stays:

4. Attach verification of non-profit status and Organization list of Officers and Directors.

5. Operating budget:

6. Marketing plan: