



Application for Special Events Funding

Owensboro Daviess County Convention & Visitors Bureau

215 East Second St.
Owensboro, KY 42303
270-926-1100

I. Introduction

The Owensboro Daviess County Convention & Visitors Bureau has designated a portion of its budget to a special events program designed to aid special events in Daviess County that promote tourist activity. The primary purpose of this program is to assist in the growth and development of events in Owensboro.

II. Statement of Policies

- A. To be considered for funding, a special event must first and foremost attract visitors to Owensboro. The increased visitation should directly and consistently increase transient lodging occupancy.
- B. This program is intended to supplement the sponsoring organization's budget, not replace it.
- C. Any funds awarded are subject to audit at the discretion of the Owensboro Daviess County Convention & Visitors Bureau.
- D. Proof of Liability Insurance for the event is an amount that satisfies the board based upon the value of the event.
- E. All projects receiving funding must include use of the Owensboro Daviess County Convention and Visitors Bureau logo and website as well as acknowledge the contribution in their other related media placements including but not limited to: press releases, public announcements, brochures, posters and radio.
- F. The approved amount will be awarded once approved.

III. Procedures for Application

- A. To be eligible for funding, requests are to be made on the attached application with all back up material and submitted to the Owensboro Daviess County Convention & Visitors Bureau at least 90 days before the event.
- B. Once the application has been received and reviewed, applicants may be asked to attend a regularly scheduled Board meeting and provide a five minute oral presentation. The Executive Director will notify the applicant if attendance at a meeting is required.
- C. Factors considered for funding include, but are not limited to the following:
 - 1. Is a target audience clearly defined in the event description?
 - 2. Does the event have the potential to draw overnight visitors to Owensboro?
 - 3. Is the event "packaging" with other local venues and events?
 - 4. Detailed promotion and advertising plan
 - 5. Submission of an itemized budget that includes projected income and expenses
 - 6. Amount of funds requested and how those funds will be spent
 - 7. Will the event generate media attention?
 - 8. The application describes how the project will increase visitation, length of stay and/or tourism expenditures from outside a radius of 50 miles.
 - 9. The overall effectiveness of the event.

IV. Post Funding Requirements

- A. The attached post event report must be submitted to the Owensboro Daviess County Convention & Visitors Bureau within 30 days following the conclusion of the event. This report must include an accounting of the spending of the funds, an event financial report, and tracking statistics regarding out-of-town visitors and their overall impact on the local economy, particularly on transient lodging facilities and occupancy.
- B. Applicant understands that if this report is not submitted, no future funds will be awarded to this organization by the Owensboro Daviess County Convention & Visitors Bureau.

V. Applicant Signature

I, _____
(Name, Print or Type) (Title)

Organization

Have read this document and will comply with the conditions stated in the Agreement for Funding of the Owensboro Daviess County Convention & Visitors Bureau should the request for funds be approved.

(Signature)

(Date)

Owensboro Daviess County Convention & Visitors Bureau
APPLICATION FOR FUNDING

BUSINESS CONTACT INFORMATION

Name of Event: _____
Sponsoring Organization: _____
Organization Director: _____
Event Contact Person: _____
Address: _____
Business Phone: _____ Home/Cell _____
Email Address: _____
Web Address: _____

ORGANIZATION INFORMATION

Date Organization Created: _____
Non-Profit Organization: Yes _____ No _____ Tax ID Number _____
Purpose of Organization: _____

EVENT INFORMATION

Amount Requested from ODCCVB: \$ _____
Location of Event: _____
Dates/Times of Event: _____
Purpose of Event: _____

History of Attendance (if previously held): _____
Anticipated # of visitors/participants this year: _____
History of room nights used: _____
Anticipated room nights this year: _____

Have units been reserved at area lodging facilities? Yes _____ No _____

If yes, complete the following:	Name of Lodging Facility	# Units Reserved
	_____	_____
	_____	_____
	_____	_____

STATEMENT OF WORK

Describe, in detail, the planned activities of the event, including the implementation schedule. Include tourism-related business and direct or indirect benefits to the Owensboro Daviess County Convention & Visitors Bureau communities specifically the number of overnight visitors, new dollars to the local economy, and other financial and/or non-financial benefits.

MEDIA PROMOTION

If the event was held previously, was media coverage provided? Yes _____ No _____

If yes, attach clippings or other documentation of coverage to this application.

What plans have been made for promotion and coverage of this year's event? _____

FUNDING

How will ODCCVB funds be spent? _____

Is the applicant or any agents of the applicant receiving any direct (i.e. commission), indirect (in-kind), or other benefits from this event: Yes _____ No _____

If yes, please explain: _____

If you have questions concerning the Application or funding process, contact the Executive Director at 270-926-1100. The application and signed Agreement for Funding ensure an understanding and compliance with the policies of the Owensboro Daviess County Convention & Visitors Bureau. Upon completion, both the Agreement and Application should be returned to the following address:

Owensboro Daviess County Convention & Visitors Bureau
215 E. 2nd Street
Owensboro, KY 42303

SIGNATURE OF PREPARER

I have read and will comply with the conditions as stated in the Application for Funding of the ODCCVB should the requested funds be granted.

_____ (Signature)	_____ (Printed Name)
_____ (Title)	_____ (Date)

**OWENSBORO DAVIESS COUNTY CONVENTION & VISITORS BUREAU
POST EVENT REPORT**

Name of Event: _____

Sponsoring Organization: _____

Contact Person: _____

Address: _____

Telephone: _____

Date(s) of Event: _____

Total of Participants: _____

Approximate room nights:	Name of Lodging Facility	# Units Reserved
	_____	_____
	_____	_____
	_____	_____

Amount of ODCCVB Funds: _____

List of expenditures using ODCCVB funds:

Total income/revenue for event: _____

Total expenditures for event in Owensboro Daviess County (i.e. vendors, hotels, caterers, etc.):

Use additional sheets as necessary and return the completed form to:
Owensboro Daviess County Convention & Visitors Bureau, 215 E. 2nd Street, Owensboro, KY 42303