



APPLICATION OVERVIEW

APPLICATIONS ARE DUE AND MUST BE RECEIVED NO LATER THAN 90 days prior to event date. Incomplete applications will not be considered. Applications may not be amended or changed after the deadline for submission. The proposal and all documents filed are public records.

Please submit your completed application along with the required documentation to:

**Auburn Area Chamber of Commerce
Attention: Tourism Coordinator
268 E Main St
Auburn, WA 98002
OR VIA EMAIL: explore@auburnareawa.org**

APPLICATION CHECKLIST

- Completed and signed the cover sheet with this packet.
- Completed application (attach additional sheets if necessary).
- A copy of your agency's current W9
- Brochures and/or other supplemental information about your event/activity/facility and/or recent tourism promotion efforts.

APPLICATION TIMELINE

The Tourism Board members will review your application. It is possible they may have additional questions for more information or clarification.

You will be notified of funding status by a representative of the Auburn Area Chamber of Commerce within 60 days of your fully completed application received by date.

How did you hear about the Explore Auburn tourism grant?

ORGANIZATION/EVENT INFORMATION

Total Amount Requested: \$ _____

Name of Event _____

Organization/Agency Name

Federal Tax ID Number

Contact Name

Title

Mailing Address

City State Zip

Phone

Email Address

Event Location

Event Date(s)

Check all service categories that apply to this application:

- Tourism Promotion/Marketing
- Operation of a Special Event/Festival designed to attract tourists
- Operation of a Tourism Promotion Agency
- Operation of a Tourism-Related Facility owned or operated by a non-profit organization
- Operation and/or Capital Costs of a Tourism-Related Facility owned by a municipality

Check which one of the following applies to your agency:

- Non-Profit (*Attach copy of current non-profit corporate registration*)
- Public Agency
- Other

APPLICANT CERTIFICATION

I am an authorized agent of the organization/agency applying for funding. I understand that my agency will be required to submit a report documenting economic impact results. I also understand that:

Tourism Promotion Activities or Tourism-Related Facilities:

This is an application for a contract with the Auburn Area Chamber of Commerce in efforts of promoting tourism to Auburn, Washington.

Events/Festivals:

The applicant has, or can obtain, general liability insurance in the amount commensurate with the exposure of the event/festival.

The Auburn Area Chamber of Commerce will only reimburse those costs actually incurred by my organization/agency for the purpose of tourism to the city of Auburn, Washington. A summited Event report before and after outlining the use of these funds are required for payment.

Signature

Date

Printed or Typed Name

PROJECT INFORMATION AND USE OF FUNDS QUESTIONNAIRE

1. Describe your tourism-related activity or event:

2. Describe why tourists will travel to Auburn to attend your event/activity/facility:

3. Provide an estimate of the number of participants who will attend the event/activity in each of the following categories. Please use the Calculation Methodology as defined below:

As a direct result of your proposed tourism-related service, provide:	Estimate	Calculation Methodology (See options below)
a. Overall attendance at your event/activity/facility		<input type="checkbox"/> DC <input type="checkbox"/> IC <input type="checkbox"/> RS <input type="checkbox"/> IS <input type="checkbox"/> SE
b. Number of people who travel more than 50 miles for your event/activity		<input type="checkbox"/> DC <input type="checkbox"/> IC <input type="checkbox"/> RS <input type="checkbox"/> IS <input type="checkbox"/> SE
c. Of the people who travel more than 50 miles, the number of people who travel from another country or state		<input type="checkbox"/> DC <input type="checkbox"/> IC <input type="checkbox"/> RS <input type="checkbox"/> IS <input type="checkbox"/> SE
d. Of the people who travel more than 50 miles, the number of people who stay overnight in UNPAID accommodations in Auburn		<input type="checkbox"/> DC <input type="checkbox"/> IC <input type="checkbox"/> RS <input type="checkbox"/> IS <input type="checkbox"/> SE
e. Of the people staying overnight, the number of people who stay in PAID accommodations (hotel/motel/bed & breakfast) in Auburn		<input type="checkbox"/> DC <input type="checkbox"/> IC <input type="checkbox"/> RS <input type="checkbox"/> IS <input type="checkbox"/> SE
f. Number of paid lodging room nights resulting from your event/ activity/ facility <i>(example: 25 paid rooms on Friday and 50 paid rooms on Saturday = 75 paid lodging room nights)</i>		<input type="checkbox"/> DC <input type="checkbox"/> IC <input type="checkbox"/> RS <input type="checkbox"/> IS <input type="checkbox"/> SE

Glossary for Calculation Methodology Options:

- ❖ **Direct Count: (DC)** Actual count of visitors using methods such as paid admissions or registrations, clicker counts at entry points, vehicle counts or number of chairs filled. A direct count may also include information collected directly from businesses, such as hotels, restaurants or tour guides, likely to be affected by an event.
- ❖ **Indirect Count: (IC)** Estimate based on information related to the number of visitors such as raffle tickets sold, redeemed discount certificates, brochures handed out, police requirements for crowd control or visual estimates.
- ❖ **Representative Survey: (RS)** Information collected directly from individual visitors/ participants. A representative survey is a highly structured data collection tool, based on a defined random sample of participants, and the results can be reliably projected to the entire population attending an event and includes margin of error and confidence level.
- ❖ **Informal Survey: (IS)** Information collected directly from individual visitors or participants in a non-random manner that is not representative of all visitors or participants. Informal survey results cannot be projected to the entire visitor population and provide a limited indicator of attendance because not all participants had an equal chance of being included in the survey.
- ❖ **Structured Estimate: (SE)** Estimate produced by computing known information related to the event or location. For example, one jurisdiction estimated attendance by dividing the square footage of the event area by the international building code allowance for persons (3 square feet).
- ❖ **Other:** (please describe)

4. Is there a host hotel for your event? Yes No
If yes, list the host hotel(s):

If a host hotel(s) was/were used last year, please provide an estimate of how many rooms were booked last year at each hotel.

5. Describe the prior success (number of attendees, media exposure, etc.) of your event/activity/facility in attracting tourists:

6. Describe your target tourist audience (location, demographics, etc.):

7. Describe how you will promote your event/activity/facility to attract overnight tourists:

8. How do you intend to use the Lodging Tax funds if selected as a grant recipient? (Please be as descriptive as possible with the strategy, plan and reasons for your application.)

9. Describe how you will promote lodging establishments, restaurants, and businesses located in the City of Auburn. What will the Explore Auburn get in return for funding (e.g. logos, links print material, radio, TV etc.)?:

10. Are you applying for Lodging Tax Grants from another community? Yes No
If yes, list the other jurisdiction(s) and amount(s) requested.

11. What is the overall budget for your event/activity/facility? Please provide an itemized list identifying each type of expenditure to be reimbursed.

12. What percent of your budget are you requesting from Auburn Lodging Tax Fund? _____%

13. Please identify your top 5 sources of revenue anticipated for your event not including requested City of Auburn LTAC funds. (Please do not include in-kind contributions.)

Source of Revenue	Amount	Confirmed? Y/N	Date Funds Available

14. What will you cut from your proposal or do differently if full funding for your request is not available or recommended?

15. Funding History - Was this event previously funded with Auburn lodging tax funds in the past four years? YES NO

16. If yes, how much funding did you receive and in what year(s):

17. Number of total years you have received City of Auburn lodging tax funds: _____

18. If you received a Lodging Tax Grant before, please explain below how funds awarded were used. If you have not been a grant recipient, there is no need to complete this section.