2019-2020

City of Waynesboro

BOOST

Building Opportunities to Support Tourism

LOCAL LEVERAGE GRANT PROGRAM

**Application**



City of Waynesboro Office of

Economic Development & Tourism

301 West Main Street

Waynesboro, VA 22980

**BOOST Program Overview**

***The beginning project date will be on or after July 1, 2019. The end date will be no later than June 30, 2020. Considerations for reimbursement:***

Costs incurred before July 1, 2019 or later than June 30, 2020 will NOT be eligible for reimbursement by the grant.

All requests for reimbursement must be made within 30 days of the event date AND before June 30, 2020 unless otherwise approved by the Department of Tourism.

All requests must be completed and billed prior to June 30, 2020. If an event occurs within the months of May or June 2020, recipients will notify Greg Hitchin at Waynesboro Tourism to make arrangements for late-term billing and reimbursement.

Supporting documentation must accompany reimbursement requests. This may include media invoices (radio, television or publications), ads placed, tear sheets and vendor/supplier invoices.

The BOOST Microgrant Program was created to support and enhance tourism efforts within the City of Waynesboro. Financial Awards **up to $3,000** **per organization** are available for projects such as events, fairs/festivals, marketing and social media applications, design and printing services, tourism-oriented directional signs as well as other projects promoting the tourism industry in Waynesboro. Completed applications are due by **noon on Monday, July 15th, 2019** to the Tourism Office. Funding for BOOST is contingent upon annual appropriations from City Council.

**Requirements for Grant Awards:**

* Events and programs receiving BOOST funds will exclusively promote City of Waynesboro tourism/business.
* Preference will be given to entries demonstrating measurable visitor attraction from outside the City.
* Any event funded must be listed on [www.virginia.org](http://www.virginia.org).
* The City’s tourism website: [www.VisitWaynesboro.net](http://www.VisitWaynesboro.net) and the City logo must be listed/heard on all project materials.
* All grant recipients will be asked to provide a link to the event/activity for promotion on the City Tourism Website. Grant recipients are also required to link to the City tourism website, [www.VisitWaynesboro.net](http://www.VisitWaynesboro.net).
* Award recipients will submit proposed artwork, advertising, and/or materials two weeks prior to initial release date for branding approval. The final version is requested one month prior to the event for promotion through Waynesboro Tourism.
* Data obtained from event attendees is useful for future marketing purposes. The City reserves the right to request surveys of attendees for all projects funded. Additionally, the City may opt to do their own survey of attendees. In kind, the City agrees to share data related to funded events with award recipients.
* Final examples of any advertising supported by a grant must be provided to the Tourism Department (copies of print ads, brochures, etc.)
* Any desired changes to an approved grant must be submitted through a written “Grant Modification Request.” The City’s written approval must be received in order to be reimbursed if changes occur after the grant has been approved.
* The City should be supplied four (4) tickets to any event funded through BOOST.
* The City will schedule time with grant recipients to go over requirements and expectations attached to the grant.

*When preparing your application, remember that the Tourism Office is  
available to work with your organization to develop an annual marketing plan. If interested, please contact the office:*

**Greg Hitchin, City of Waynesboro – Tourism**

**540.942.6570** [hitchinge@ci.waynesboro.va.us](mailto:hitchinge@ci.waynesboro.va.us)

**Project Description**

Please include a thorough depiction of the proposed tourism-related venture. This document may be up to three (3) typed pages in length (12 pt. font, please). In short, we want to know anything and everything about your project that you feel is important as it pertains to tourism (defined as drawing visitors from outside of Waynesboro). This is the area of the application where you have the most leeway in convincing the committee that your event/activity has an impact on tourism, so be persuasive!

**Event/Project Title:** Click here to enter text.

**Brief Description (may be published; 2-3 sentences):**Click here to enter text.

**If Event, Date and Start/Stop Time(s):** Click here to enter text.

**If Event, Location:** Click here to enter text.

**What is the history of the project?**Click here to enter text.

**Describe the schedule/agenda for the event (you may attach a schedule):**Click here to enter text.

**Please describe any special guests or performances?**Click here to enter text.

**If any revenues are to be earmarked for a community-oriented purpose, please detail (include amount/percentage proposed and intent).**Click here to enter text.

**Full Description**

Please complete each of the following areas. You may add to this information, if desired.

**MARKETING** - describe or attach the marketing plan you propose to follow. Where do you plan to advertise and when? What type of attendees/audience do you expect to attract from this project? (Suggestions: local residents, out-of-town visitors, young families, business professionals, etc.). How will you alert them prior to the activity?  
Click here to enter text.

**PARTNERS** - Please identify partners within the community that are supporting this idea, and describe the type of support (financial, in-kind, or some other way). Include reasons why the community will endorse this event/project. Is your activity offering any overnight package stays or other enticements to its participants?  
Click here to enter text.

**PROJECT BUDGET & OTHER FUNDING SOURCES** - Outline the project budget and describe other sources of financial support for this program/activity. Besides your organization, your partners and this (potential) grant, how will it be funded?  
Click here to enter text.

**OTHER AREA EVENTS -** Are there any similar tourism-related events/projects occurring within an hour’s drive during the proposed date(s)? What about a half-hour drive during other times of the year? If so, what sets your event apart as different or unique?  
Click here to enter text.

**ATTRACTIVENESS** - What makes your proposed event/project unique or special for the area? How will it help attract tourism and reinforce the City of Waynesboro as a great tourist destination?  
Click here to enter text.

**PAST PERFORMANCE** (for repeat projects only) - Please submit past attendance numbers for the last 3 projects/events. Were there any aspects that could have been planned more effectively, and how are those being addressed this year?   
Click here to enter text.

**IMPACT -** How will the project be affected if this grant is not awarded? Are there plans for this to be an annual or recurring activity?   
Click here to enter text.

**ADDITIONAL INFORMATION** - Please provide any additional information you feel may be pertinent to the committee’s consideration of this grant.  
Click here to enter text.

**Contact Information**

If multiple departments within the same organization are joining together, please complete one table for each department. Additional pages can be added as needed:

|  |  |
| --- | --- |
| Name of Submitting Organization | Click here to enter text. |
| Department Name | Click here to enter text. |
| Mailing Address  City/State/Zip | Click here to enter text. |
| Physical Address of Project  (Constitution Park, Downtown, etc.) | Click here to enter text. |
| Name/Title of authorized point of contact | Click here to enter text. |
| Telephone Number (work/cell) | Click here to enter text. |
| E-mail Address | Click here to enter text. |
| Program Website | Click here to enter text. |
| Financial Commitment from your organization to the program—Amount $ | Click here to enter text. |

Signature of Authorized person/point of contact:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Date

|  |  |
| --- | --- |
| Name of Submitting Organization | Click here to enter text. |
| Department Name | Click here to enter text. |
| Mailing Address  City/State/Zip | Click here to enter text. |
| Physical Address of Project  (Constitution Park, Downtown, etc.) | Click here to enter text. |
| Name/Title of authorized point of contact | Click here to enter text. |
| Telephone Number (work/cell) | Click here to enter text. |
| E-mail Address | Click here to enter text. |
| Program Website | Click here to enter text. |
| Financial Commitment from your organization to the program—Amount $ | Click here to enter text. |

Signature of Authorized person/point of contact:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Date

**Project Budget & Funding Sources**

**Please list all potential sources and uses for funds.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Project Funding Source – Money Input** | | **Planned Use of Funds – Money Outlay** | | |
| Partnerships – list by organization name | | Advertising – list publication or source by name | | |
| Waynesboro BOOST Grant | Amount Requested  $Click here to enter text. | Newspapers | $Click here to enter text. | |
| Partner #1:  Click here to enter text.  Contact:  Click here to enter text. | $Click here to enter text. | Magazines | $Click here to enter text. | |
| Partner #2:  Click here to enter text.  Contact:  Click here to enter text. | $Click here to enter text. | Printing costs (rack cards, posters) | $Click here to enter text. | |
| Partner #3:  Click here to enter text.  Contact:  Click here to enter text. | $Click here to enter text. | Radio | $Click here to enter text. | |
| Other Revenue | | Television | $Click here to enter text. | |
| In-kind contributions | $Click here to enter text. | Other (specify) |  | |
| Sponsorships | $Click here to enter text. | Click here to enter text. | $Click here to enter text. | |
| Other (specify) |  | Click here to enter text. | $Click here to enter text. | |
| Click here to enter text. | $Click here to enter text. | Click here to enter text. | $Click here to enter text. | |
| Click here to enter text. | $Click here to enter text. | Click here to enter text. | $Click here to enter text. | |
| Click here to enter text. | $Click here to enter text. | Click here to enter text. | $Click here to enter text. | |
| Event Income | | Project Costs | | |
| Vendor Fees | $Click here to enter text. | Graphic Design fees | | $Click here to enter text. |
| Gate/Ticket Sales | $Click here to enter text. | Supplies / Materials | | $Click here to enter text. |
| Concessions/Souvenir Sales | $Click here to enter text. | Portable Toilets | | $Click here to enter text. |
| Other (specify) |  | Food | | $Click here to enter text. |
| Click here to enter text. | $Click here to enter text. | Other (specify) | |  |
| Click here to enter text. | $Click here to enter text. | Click here to enter text. | | $Click here to enter text. |
| Click here to enter text. | $Click here to enter text. | Click here to enter text. | | $Click here to enter text. |
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| Click here to enter text. | $Click here to enter text. | Click here to enter text. | | $Click here to enter text. |
| **Total** | $Click here to enter text. | **Total** | | $Click here to enter text. |
| *Total Funding Source should equal Total Planned Use of Funds.*  *Please show a balanced budget and include any necessary explanations when using the “other” category.* | | | | |

The undersigned hereby certifies that the information supplied in this application is true and correct and that I/we have read and understand the Program Overview and Considerations that govern this grant program and are attached. I/We further understand that if the grant is awarded, any changes to the grant must be submitted to the Tourism Department through a “Grant Modification Request” available through the City of Waynesboro Tourism Office, and written approval must be secured for changes before reimbursement will be made. I/We acknowledge that any variance from or violation of the rules and procedures governing the City of Waynesboro Tourism Grant Program may result in non-reimbursement for any or all expenditures connected with the grant.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FOR OFFICE USE ONLY**

**The City of Waynesboro Department of Tourism agrees to reimburse**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**in the amount of $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**for the\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ project, based on compliance   
  
with all procedural rules set forth in the application.**

**Authorized Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Approval Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Grant Award Disclosure**

**The applicant shall disclose any financial benefit that will be received should the grant be awarded by any entity in which the applicant organization/representatives/employees have an ownership interest.**

1. Will the applicant organization receive a “direct financial benefit”**\*** if this grant is awarded?  
     
    Yes  No

If yes, please describe the benefit to be received**\*\***:   
  
Click here to enter text.\_

1. Will an employee or representative of the applicant organization receive a “direct financial benefit” **\*** if this grant is awarded?   
     
    Yes  No

If yes, please identify the employee/representative receiving the benefit and describe the benefit to be received:  
  
Click here to enter text.

1. Do any other employees/representatives of the applicant organization have a vested interest in the project?  
     
    Yes  No

If yes, please identify the individual and describe the vested interest he or she may have:  
  
Click here to enter text.

**\*Direct financial benefit** means that a portion of the total project cost will be received by the applicant/representative/employee or by an entity in which the applicant organization/representative/employee has an ownership interest.

**\*\*NOTE: Failure to disclose** this information shall result in the **cancelation of any grant** to the applicant previously approved by the City of Waynesboro Tourism Office and the **disqualification of the applicant organization and its representative from future grant awards.**

**Reimbursement Request Example**

**PLEASE INSERT YOU LOGO OR USE LETTERHEAD**

Date

Greg Hitchin

City of Waynesboro Tourism Office

301 West Main Street

Waynesboro, VA 22980

Dear Mr. Hitchin,

Our organization has completed the activity/event relative to the BOOST Tourism Grant in the amount of $\_\_\_\_\_\_\_\_\_\_ as described in our grant application.

This this is the final request and all grant funds awarded will be exhausted upon processing of this reimbursement request: \_\_\_Yes \_\_\_No

We hereby request payment in the amount of $\_\_\_\_\_\_\_\_\_\_ from the City of Waynesboro Tourism Office for the grant funds due per the award. The event summary sheet, copies of the articles and advertisements and eligible invoices are attached for your review.

Please check payable to:

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

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

Sincerely,

(Point of Contact)

(Title)

(Email Address/Phone)