



## 2020 CITY OF MIRAMICHI FESTIVAL AND EVENTS GRANT APPLICATION

### ORGANIZATION'S LEGAL NAME

### APPLICANT INFORMATION:

Address:

City:

Postal Code:

Telephone

Fax:

Website

### CONTACT PERSON (LIST 2):

Name:

Title:

Phone:

Email:

Mobile:

Name:

Title:

Phone:

Email:

Mobile:

### STATE THE OBJECTIVES OF YOUR ORGANIZATION/COMMITTEE

### GRANT APPLYING FOR:

Festivals and Events (please see attached Survey Information)

**BRIEF DESCRIPTION OF THE PROJECT:**

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**PLEASE INDICATE IN PERCENTAGES THE PURPOSES OF THE ORGANIZATION:**

PURPOSE	PERCENTAGE
Recreation and Cultural Social and Family Environmental Heritage Advocacy	
Other – Provide Information	

**VOLUNTEER AND PARTICIPANT INFORMATION:**

Number of Volunteers:

Number of Volunteer Hours (estimate):

**PLEASE IDENTIFY OTHER CONTRIBUTIONS APPLIED FOR:**

PROGRAM	AMOUNT.
1.	
2.	
3.	
4.	

**GRANT AMOUNT/IN KIND SERVICES**

Cash Grant requested: \_\_\_\_\_

In-Kind Services provided by the City(description and value):



## PURPOSE OF THE GRANT

Please indicate how grant would be utilized:

## FINANCIAL INFORMATION

Include the most recent audited/reviewed year-end financial statements.

*(Balance Sheet and Income statement)*

For current year grant provide a Budget including Revenues and Expenditures

Other Assets:

Bank Balance:

Investment Certificates/Reserves:

Any other liquid assets:

Is the organization a registered non-profit?

Yes       No

Is the organization supported by other levels of government?

Yes       No

Are there full-time paid employees?

Yes       No

Does the festival/event attract media attention?

No       Regional       Provincial       National       International

## WHAT IS THE EXPECTED PAID ATTENDANCE OF THE FESTIVAL/EVENT?

**WHAT PERCENTAGE OF THE EXPECTED PAID ATTENDANCE ARE YOU EXPECTING TO BE OVER-NIGHT VISITORS OR DAY TRIPS?**

TYPE OF PARTICIPANT	PERCENTAGE
1. Overnight visitor	
2. Day visitor	

**HAS THE FESTIVAL/EVENT BEEN SUCCESSFUL IN ATTRACTING SPONSORSHIP?**

SPONSOR	AMOUNT
1.	
2.	
3.	
4.	



## DECLARATIONS:

I hereby certify that the information included with this application is complete, and is true and correct to the best of my knowledge, and that I have been authorized by the Board of Directors to make this declaration and to submit this application on behalf of the above named organization.

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**Signature**

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**Position**

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**Date**

I hereby declare that if our organization is successful at obtaining a City of Miramichi grant we will provide the City with a post grant report for review of the project/program including the number of participants for which the grant was obtained to ascertain whether grant monies received were used for the stated purpose(s) set out in this application.

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**Signature**

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**Position**

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**Date**

## EVALUATION CRITERIA:

- Completed application with required information
- Activity within the boundaries of the City of Miramichi
- Serve clearly identified community needs and benefits a meaningful number of people
- Has the proposed project /activity been thoroughly developed and carefully planned
- In-kind services required? Quantified?
- Encourage and promote the benefits of volunteering in the community
- Effectively markets city programs and culture to residents, visitors and businesses
- Continues partnerships that improve service opportunities
- Increase and sustain the number of visitors to the city
- Expected positive economic impact to the community

## FESTIVAL AND EVENT RESULTS FOR ECONOMIC IMPACT ASSESMENT:

Required if the event is gated (meaning they are selling tickets and tracking attendance).

Total budget for the event: \_\_\_\_\_

Final attendance of the event: \_\_\_\_\_

### Results of the following Survey:

- 1) How far have you travelled to get to Miramichi? \_\_\_\_\_ KM
- 2) How many people are with you? \_\_\_\_\_ over 16 years \_\_\_\_\_ 16 years and under
- 3) What is your postal/Zip Code \_\_\_\_\_
- 4) Do you live in N.B. \_\_\_\_\_ YES \_\_\_\_\_ NO  
Are you staying overnight? \_\_\_\_\_ YES How many nights? \_\_\_\_\_  
\_\_\_\_\_ NO
- 5) How many times did you leave your place of accommodation today? \_\_\_\_\_

**A sample Size of 100 surveys is recommended**

