



## **TOURISM DEVELOPMENT GRANT Application Form**

The Fox Cities Convention & Visitors Bureau accepts grant applications for costs related to development of Fox Cities visitor attractions and amenities.

Tourism Development grants may not be used for operating expenses, annual fund drives, endowment funds, reimbursement of previously incurred expenses, research, travel or expenses typically considered to be overhead.

### **Grant deadlines:**

**February 20, April 20, June 20, October 20 and December 20**

#### **Submit Grant Application to:**

Pam Seidl, Executive Director

Via email: [pseidl@foxcities.org](mailto:pseidl@foxcities.org)

Fox Cities Convention & Visitors Bureau

213 S. Nicolet Rd., Appleton, WI 54914

(920) 734-3358

[www.foxcities.org](http://www.foxcities.org)

**Please complete all sections of this form.**

Date of Application:

Name of applicant organization:

Amount of Tourism Development Grant requested:

Business/organization type (check all that apply):

☐ Corporation: ☐ Partnership: ☐ Sole Proprietorship: ☐ Non-Profit:

Person in Charge of Project:

Address:

City:

State:

Zip Code:

Daytime phone:

Email:

**ORGANIZATION INFORMATION**

Legal organization name:

CEO:

Address:

City:

State:

Zip Code:

Daytime phone:

Number of Employees:

Purpose of Organization:

**REFERENCES**

May we contact your attorney?

May we contact Your Accountant?

A "Yes" answer authorizes your attorney or accountant to disclose relevant information which might otherwise be privileged. The Fox Cities CVB will endeavor to maintain the confidentiality of all information so obtained:

**ATTORNEY**

Name:

Address:

City:

State:

Zip Code:

Phone:

**ACCOUNTANT**

Name:

Address:

City:

State:

Zip Code:

Phone:

**PROJECT ARCHITECT (if applicable):**

Name:

Address:

City:

State:

Zip Code:

Phone:

**CONSTRUCTION GENERAL CONTRACTOR (if applicable):**

Name:

Address:

City:

State:

Zip Code:

Phone:

Project:

Project Completion Date:

1. Give a detailed description of the project answering ALL of the questions below:

2. Has there been a feasibility study or market study for this project?      Yes                      No  
If so, please share what you learned. If not, what has been done to determine whether success is likely?

- Fox Cities Convention & Visitors Bureau Tourism Development Grant Application Page | 3

4. What is the useful life of building or project?

5. Is there municipal, county or state support for this project? If so, please describe the kind of support the project is receiving.

#### **DESTINATION MASTER PLAN ALIGNMENT**

Does this project address any of the priorities noted in the Fox Cities Destination Master Plan? Check all that apply.

- Development of new festival experiences, especially in winter
- Regional indoor concert/event venue
- Addressing infrastructure gaps at existing venues
- Iconic art trail development/public art
- Amplifying outdoor recreation, especially waterways and winter options
- Completion of gaps in regional trail system
- Enhancing connectivity, walkability and alternative transportation options
- Increase in air service to the area

#### **TOURISM IMPACT**

1. What impact will the project have on the tourism economy? Will this project enhance the visitor experience and/or attract visitors from outside of 50 miles, or will it be an amenity that visitors will use?

#### **COLLABORATION**

1. How do you envision your organization working with the Fox Cities Convention & Visitors Bureau once the project is completed? What other attractions or community organizations will you collaborate with?

### **OPERATIONAL PLAN**

1. Describe in detail your operational plans for the organization after this project is complete, with specific emphasis on how it will be **marketed to the visiting public**. Be sure to include information on the following:
  - a. How will you be staffed? How experienced is your staff?
  - b. How will you insure adequate operational funding? Funding during the start-up period?
  - c. Who is your target audience?
  - d. How large do you anticipate your marketing budget to be?
  - e. What kinds of sales, advertising and promotions will you do?
  - f. Who will provide you with the marketing expertise you need?
  - g. What plans do you have for cross promotion with other attractions?

### **OTHER**

What else should we know to help us decide whether to give a grant to assist this project?

### **FUNDRAISING**

How much money do you have left to raise for this project? Provide a detailed plan for raising those funds.

## **Project Budget**

Date prepared:

### **SOURCE OF FUNDS**

Tourism Development Grant request	.
Other Contributions collected	.
Other Contributions receivable	.
Contributions remaining to be subscribed	.
Loan	.
Other (specify)	<u>.</u>
<b>TOTAL</b>	.

### **USE OF FUNDS**

Land purchase	.
Land improvements (preconstruction site testing and work)	.
Construction costs (itemize/detail below)	.
Fees	.
Installation	.
Supplies/Materials	.
Other (itemize)	<u>.</u>
<b>TOTAL</b>	\$

**REQUIRED ENCLOSURES**

Please one (1) copy of each of the following.

- Most recent annual report
- Most recent audit
- Bylaws
- List of board members
- A copy of any market or feasibility study that has been done for this project
- Drawings, schematics, site plans or any concepts that will help us visualize your project

---

Applicant Signature

Printed Name

Title

Date