



**Effingham Local Tourism Grant Program  
APPLICATION**

Name of Event/Project: \_\_\_\_\_

Date(s) of Event/Project: \_\_\_\_\_

Location of Event/Project: \_\_\_\_\_

Address of Event/Project Venue (if applicable): \_\_\_\_\_

Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Amount Requested: \_\_\_\_\_

I, \_\_\_\_\_, hereby agree to reimburse the Tourism Department the full amount of the grant awarded if the event is cancelled for any reason.

Signature: \_\_\_\_\_  
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**FOR OFFICE USE ONLY**

File #: \_\_\_\_\_

Date Received: \_\_\_\_\_

Date Approved/Denied: \_\_\_\_\_

Amt. Approved: \_\_\_\_\_

Date Paid: \_\_\_\_\_

Date Final Report Received: \_\_\_\_\_

1. Describe the event/project in detail:

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2. How do you think this event will generate overnight stays for Effingham? How many overnight stays do you project?

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3. What is your expected attendance for the event? If this event has been held in the past, how will this year's attendance compare? Is this event open to the public?

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4. Will there be an admission charge for this event?

☐ Yes

☐ No

5. What is your marketing plan? (Describe the strategies your organization will use to promote the event/project (i.e. advertising, public relations, marketing, print collateral, distribution of promotional pieces, etc.)

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6. How do you plan to collect data to measure the results of your event/project?  
(Event attendance, # of overnight stays, profile of attendees, etc.)

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7. Is your organization relying on another source of grant funding?  
☐ Yes ☐ No

8. Is this an annual event?

☐ Yes ☐ No

9. If yes, where else is your organization applying for funding?

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10. Attach a complete itemized budget showing all costs associated with the event. Show both expected revenue and expected expenditures.

**Please return this application to:**

Effingham Tourism Department

201 E. Jefferson Ave.

Effingham, IL 62401

[jthoele@effinghamil.com](mailto:jthoele@effinghamil.com)

Fax – (217) 342-4939