



**Organizational and Applicant Profile Sheet**  
**2022-2023 Visitor Experience Fund –Accessibility for All – Round 2**

Name of Organization:

D.B.A. if applicable:

Address of Organization (where work is to be done):

Status of Organization: 501c3; 501c6; Local Development Corporation; Municipality; Other – Explain:

Name of Person Filling out the Application:

Position of Person Filling out the Application:

Please indicate whether the organization has a paid, full or part time professional as a managing staff. If not, please demonstrate sound governance, administrative and financial practices. Provide names/titles:

Contact email and phone number and address for Applicant:

**Amount of Application:**

Total Program/Project Cost: \$

Visitor Experience Fund Request: \$ \_\_\_\_\_  
(maximum up to \$5,000)

Matching (in-kind): \$ Value \_\_\_\_\_

Describe and list. (i.e. carpenters from the Rotary club are committing 5 hours of labor at \$75 per hour)

Matching (cash): \$

**Signatures:**

I agree to the requirements of reporting and accountability as outlined in the Program Overview.

- |   |     |              |
|---|-----|--------------|
| a. To place a link to FLVC on my website.   | Yes | No (explain) |
| b. To publicly acknowledge the support of FLVC and Ontario County and allow them to use my program as a model if desired. | Yes | No           |
| c. To collect and share survey data which measure tourism impact and results.   | Yes | No           |

See Requirements/Reporting/Accountability: Items: d, e, f, g, h. Yes No

**Signature:**

**Date:**

**Project Profile and Details**  
**2022-2023 Visitor Experience Fund – Accessibility for All – Round 2**

**Project Profile and Details:**

Please answer the questions below in as much detail as possible. Please attach any documents which may help address or illustrate your proposal – especially as they relate to the goal of accessibility. Please note that photographs may be used as before and after public relations.

1. Describe your project (provide attachments as necessary):
  
2. Articulate how your project fulfills our mutual goals of improving the visitor experience and aligns with Finger Lakes Visitors Connection Strategic Plan. (i.e. it will help to improve the winter season, or to diversify your audience etc.):
  
3. Demonstrate how your project meets the vision of FLVC’s program, “Accessibility for All”:
  
4. What is your implementation plan for this proposal?
  - a. Timeline
  - b. Budget and cash flow
  
5. Please define, “the visitor” you see benefitting from this? What measures of improvement can you predict with the improvement in place (i.e. more of this market will come; higher satisfaction levels.)? If there is an opportunity to translate this to economic return, please do.
  
6. What is your plan for collecting data and reporting completion and progress?
  
7. Please cite your organization’s long-range plan or goals for improving accessibility for visitors to your facility.

**Submission:**

Please submit this form and any attachments electronically in a .pdf form to [Projects@VisitFingerLakes.com](mailto:Projects@VisitFingerLakes.com) by October 28, 2022.