

## **APPLICANT INFORMATION**

Organization Name:			
EIN:			
Mailing Address:			
City:		State:	Zip:
Phone:	Email:		
Website:			
Primary Contact:			
Title:			
Phone:			
Email:			
Project Title:			
Total Amount to be Requested:			
PROJECT DESCRIPTION (Please attach an additional page if needed)			

Send this document or make other inquiries to:

## **Visit McKinney**

Executive Director
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972-547-2059 • executive director@visitmckinney.com