

## **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 200 W. Virginia • McKinney, TX • 75069 972-547-2059 • <u>executivedirector@visitmckinney.com</u>