**Frederick County Tourism Reinvestment in Promotion & Product (TRIPP) Program**

**FY21 Tourism Advertising & Development Grants**

***REVISED March 20, 2020***

**Deadline for application submission is 5:00 p.m., Friday, May 15, 2020. An original and 5 copies of the TRIPP application are required. *Electronic submissions will not be accepted.***

Applicant (organization): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Project: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Application Type: (check all that apply) \_\_\_\_\_\_\_Advertising and/or \_\_\_\_\_\_\_Development

*If you are applying for Advertising and Development and the answers to the questions in the application are entirely different, you may submit 2 separate applications (one Advertising and one Development).*

**Contact and Applicant Information**

Name and title of person preparing application:

Name: Title:

Organization Address:

Organization Phone: Organization Email:

Federal employer ID#: Organization Website:

Name and title of person responsible for daily project implementation and management:

Name: Title:

Phone: Email:

**SECTION I *(all applicants)***

*(Refer to guidelines for details)*

* **Brief description of advertising and/or development project goals.**
* **How many visitors did your attraction or event receive in 2018 and in 2019?**
* **Provide demographic information you have about your visitors/attendees, including percentage of out-of-county visitors compared to local residents**.

**Performance Measurements**

* **How will your efforts result in increased spending by visitors to Frederick County?**
* **How will you measure the increased spending results?**
* **How many hotel room nights do you anticipate your program will generate?**
* **How will you promote overnight stays in Frederick County hotels and other increased visitation to Frederick County**? ***(Guidelines Section I – Performance Measures #2)***
* **How will you measure overnight hotel stays?**
* **How will you improve the visitor experience?**
* **What are your past TRIPP award results from the most recent 2 years, if applicable?**
* **Previous grant recipient, attach the final report for the most recent closed out TRIPP award at end of application**. **If you did not use all of the award, what prevented you from using all of the funds?**
* **If your project is weather-dependent, what is your inclement weather plan?**

**SECTION II *(Advertising)***

**Advertising Award**

* *N/A Applying for TRIPP Development funds only. Skip to Section III.*

**(Guidelines Advertising A-1)**

* **Explain how you’ve identified the audiences that will be interested in your message.**
* **How did you select the appropriate media to efficiently reach the audience**? **Tell us why the media outlets you provided make sense for your organization.**

Amount requested (choose one): *Attach media schedule to your application after this page.*

**Media Schedule Award** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(Guidelines A-2)**

**SECTION III *(Development)***

**Development Grant**

* *N/A Applying for TRIPP Advertising funds only. Skip to Section IV.*

**(Guidelines D-1)**

* **How will residents of other areas learn about your activity**?

**Program / Project Start Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If event, also show the date(s) of event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Budget Summary**

Amount of grant request ($1,500 to $15,000): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount of cash match: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount of in-kindmatch (< 25% of match): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TOTAL BUDGET:**

**Total must be at least twice the grant request \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Development Project Expenses:** *If you want to create this template as an Excel form to automatically calculate columns instead of filling out the form below, attach the Excel form to the application after this page.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line Items** | **TRIPP Fund** | **Applicant’s Match** | | **Total** |
| **Cash Match** | **In-Kind Match** |
|  | $ | $ | $ | $ |
|  | $ | $ | $ | $ |
|  | $ | $ | $ | $ |
|  | $ | $ | $ | $ |
|  | $ | $ | $ | $ |
|  | $ | $ | $ | $ |
|  | $ | $ | $ | $ |
| **TOTALS:** |  |  |  |  |

*Note: Alcohol and food will not be funded through TRIPP but may be included as applicant’s match*

**SECTION IV *(all applicants)***

**Advertising and Development Grant applicant matching fund source(s)**

* Identify source(s) of matching funds (Advertising and Development), in-kind contributions (Development only), and other revenue for the project. For each source of matching funds indicate if the funding is secured at time of application. ***(Guidelines Section IV – 1)***
* Partnerships are encouraged. Partners may be any entity, commercial or nonprofit, with the exception of lodging businesses outside of Frederick County. *Attach letters after signature page.* **(Guidelines Section IV – 2)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\*Applicant Signature Title Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Print name**

***\*I certify I am authorized to sign on behalf of the applicant organization to enter into an agreement with the Tourism Council of Frederick County. I also acknowledge I have read the TRIPP Terms and Conditions in the FY21 Tourism Advertising & Development Guidelines.***