

SOUTH PADRE ISLAND EVENT FUNDING

### **APPLICATION**

#### **SUBMIT COMPLETED APPLICATION TO:**

April Brown, Special Events Manager C/O City of South Padre Island Convention and Visitors Bureau 7355 Padre Blvd., South Padre Island, TX 78597 Phone: (956) 761-3000

Email: april@sopadre.com

### SOUTH PADRE ISLAND EVENT FUNDING

# **APPLICATION**



To apply for funding please complete all questions.

ORGANIZATION INFORMATION	
Date Application Submitted:	
Name of Organization:	
Address:	
City, State, Zip:	
Full Name:	E-Mail:
Office Number:	Cell Phone Number:
Website for Event or Sponsoring Entity:	
Non-Profit or For-Profit Status:	Tax ID #:
Primary Purpose of Organization:	
EVENT INFORMATION	
Name of Event:	
Date(s) of Event:	Primary Location of the Event:
Amount Requested:	

If greater than previous year funded (if applicable), please explain the increase being requested:
Primary Purpose of Event:
How will the hotel tax funds be used? Please attach a list of the hotel tax funded expenditures.
Are you asking for any cost reductions for city facility rentals or city services? Please quantify and explain.
AMOUNT REQUESTED UNDER EACH CATEGORY
Advertising, Solicitations, Promotional programs to attract tourists and convention delegates or registrants to the municipality or its vicinity. Amount requested under this category:  \$:
Expenses including promotional expenses, directly related to a sporting event in which the majority of participants are tourists. The event must substantially increase economic activity at hotels within the city or its vicinity. Amount requested under this category:
<b>\$</b> :

### QUESTIONS FOR ALL FUNDING REQUEST CATEGORIES

How many years have you he	eld this event?	
Attendance for previous year	(if applicable):	
How many of the attendees a	are expected to be from more t	han 75 miles away?
How many people attending	the event will use South Padre	Island lodging establishments?
How many nights do you ant	cicipate the majority of the tour	ists will stay?
Will you reserve a room block	k for this event at area hotel(s)?	
Where and how many rooms	s will be blocked?	
•	three years) that you have host en from HOT funding and the r Assistance Amount	•
How will you measure the imusage information, a survey of	npact of your event on area hoto of hoteliers, etc.)?	el activity (e.g.; room block
Please list other sponsors, or your event:	ganizations, and grants that ha	ve offered financial support to

Will the event charge admission? If so, what is the cost per person/group?				
Do you anticipate a net profit from the event? If so, what is the anticipated amount and how will it be used?				
•	rts your organization is planning and the amount estimated			
Print \$:	Website \$:			
Radio \$:	Social Media \$:			
TV \$:	Other Digital Advertising \$:			
A link to the CVB <u>must be</u> inc booking hotel nights during t	cluded on your promotional handouts and on your website for this event.			
What other marketing initiati activity for this event?	ives are you planning to promote hotel and convention			
Who is your target audience?				
What geographic region(s) ar	e you marketing to?			
Have you obtained the insura	ance required and who is the carrier?			

During the term of this agreement, the event organizer shall procure and keep in force insurance with limits of \$1,000,000 per occurrence and 2,000,000 general aggregate. The policy must contain a policy endorsement that names "The City of South Padre Island, it's elected officials, representatives, employees or agents" as additionally insured. Applicant must provide a copy of the actual endorsement.

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## **CHECKLIST**



To apply for funding please provide all the required documents.

Na	me of Event:			
	Received and understood the separate Special Events Policy (REQUIRED)			
	Received and understood the separate HOT Funding Guidelines (REQUIRED)			
	Completed the South Padre Island Event Funding Application form (REQUIRED)			
	Enclosed a description of all planned activities or schedule of events (REQUIRED)			
	Enclosed a complete detailed budget (REQUIRED)			
	Enclosed an advertising/marketing and promotion plan (REQUIRED)			
	In Room night projections, with back-up, for the Funded Event (REQUIRED)			
	I agree: Any marketing for the event must be consistent with the brand image for South Padre Islan and all such marketing pieces that are funded with hotel tax must be in accordance. (REQUIRED)			
	I agree: The SPICVB will require access to event participant database information that will show zip code data to measure likely impact from the funded event. (REQUIRED)			
	Enclosed a sponsor list (categorized by "confirmed" and "pending")			
	Enclosed a vendor/exhibitor list (categorized by "confirmed" and "pending)			
	Enclosed an event map			
	Enclosed security/safety plans			
	Enclosed copies of promotional materials (if available)			
	Enclosed a summary of previous special event experience of organizer(s)			
	Enclosed a history of event (if previously produced)			
	Indicated the type(s) of assistance requested			
	Indicated the amount of financial support (if requested)			
Au	thorized Signature Date			
— Pri	nt Name			