

**CITY OF WILSONVILLE – 2018  
COMMUNITY TOURISM/MATCH GRANT APPLICATION COVER PAGE**

Project Title: \_\_\_\_\_

Applicant Name \_\_\_\_\_

Registered Tax Exempt Number: \_\_\_\_\_

Street Address \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ E-Mail \_\_\_\_\_

Project Duration: Start Date \_\_\_\_\_ Estimated Completion Date: \_\_\_\_\_

<b>TOTAL PROJECT BUDGET*</b>		\$ _____
<b>APPLICANT CASH MATCH (a)</b>	\$ _____	
<b>IN-KIND RESOURCES (b)</b>	\$ _____	
<b>TOTAL APPLICANT MATCH (a+b)</b>		\$ _____
<b>GRANT REQUEST</b>		\$ _____
<i>*Provide detail on budget page</i>		
<i>**"Total Applicant Match" must be equal or greater than "Grant Request"</i>		



**Budget Summary Cont. (this format must be used):**

**Organization Budget:** This budget shows how this project fits into your organization. The project should be shown as a line in this budget.

Fiscal Year: \_\_\_\_\_ to \_\_\_\_\_

Income Sources	Amount
Total Organization Income	

Expenses	Amount
Total Organization Expense	

**Project Narrative Questions:**

1. Provide a project description *(500 words or less)*
2. How will your project promote Wilsonville tourism? *(250 words or less)*
3. How will your project benefit the Wilsonville Community? *(250 words or less)*
4. What are your organization's goals for this project (use measurable data)? Consider the question: How will you know that you succeeded in your goals? *(250 words or less)*
5. If this is an annual event for which you have received Tourism/Match Grant funding for in the past, what new or expanded attractions have been added (please note: annual events must add attractions in order to be eligible for grant funding)? *(250 words or less)*
6. How are you/your organization suited to produce this project/program?  
Provide the community resources that will be used if applicable (volunteers, local vendors, local contributions, etc.) *(250 words or less)*

**Signature and Certification Letter:**

I hereby certify that all the facts, figures and representations made in this application, including all attachments, are true and correct. This application is made with the written approval of my board of directors, which is attached to this application.

I agree that all publicity, press releases, publications, materials and /or media advertising produced as a part of this proposed project will acknowledge the Grant Program as follows:

**“This project is made possible in part by a grant from Wilsonville transient lodging taxes and the City of Wilsonville.”**

I agree to carry out this project as outlined within this application. Further, I understand that failure to do so will invalidate this agreement and necessitate the immediate return of all Community Tourism Matching Grant monies to the City of Wilsonville.

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Signature of Authorizing Official

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Date

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Print Name of Authorizing Official

## **GRANT FUNDING FOLLOW-UP**

***This form must be returned within 60 days of your project completion.***

1. Who benefited from your project or event?
  - How Many?
  - Where From?
  
2. Were the measurable evaluation goals listed in your narrative were achieved? How?
  
3. Will this event or project be recurring? How do you anticipate funding the project in the future?
  
5. Attach a copy of your final financial income and expense statement for this event or project.
  - If there is a budget surplus, please explain its use.

**\*\*Please keep a copy of this evaluation.**

**You will be required to submit a copy should you apply for future grant funding.**

## **Community Tourism/Match Grant Application Packet Checklist**

For your application packet to be considered complete, all items must be included in the following order:

1. **Grant Application Cover Page**
2. **Budget Summary**
3. **Project Narrative Questions**
4. **Signature and Certification Letter**
5. **Copy of tax-exempt status determination letter**
6. **Completed copy of last year's Project Evaluation – Grant Funding Follow Up form**  
(applicable to your organization/project if you received grant funding the prior year)
7. **Appendices** - Attach no more than 2 pages of support materials.

**Please submit 1 paper copy and an electronic copy (pdf on usb memory stick) of the entire application to the Wilsonville Parks and Recreation Admin Offices, 29600 SW Park Place.**

If you have any questions, please contact:  
Brian Stevenson, Recreation Coordinator  
(503) 570-1523  
stevenson@ci.wilsonville.or.us

