



## Visit Dublin GA Tourism Grant Program

### APPLICATION FOR FUNDING REQUEST, FY25 CYCLE 1

- Complete this Application Checklist, fill out and sign application.
- Submit Responses to the following:
  1. Describe the tourism product for which you are requesting this grant. Include its mission, goals, and activities. If this is a project, provide a project completion timeline for the next 12 months. If this request is part of a larger product, please describe the larger product and how this component is integrated. (25 points)
  2. Describe in detail how this product relates to TOURISM, focusing on the overall economic impact of tourism to Laurens County. What new spending will your product generate from those outside Laurens County who would visit? What attendance figures do you expect? (25 points)
- Submit a product marketing plan to attract visitors from outside of Dublin-Laurens County (50+ miles). This can include targeted social media ads; digital, print, and television ads; and billboards. (25 points)
- Submit a line-item budget for the product. Grant applications with financial input from the organization or other outside organizations are typically graded higher than those requesting 100% assistance. (20 points)
- Submit one (1) letter of support for the product. (5 points)

**Submit application and required documents with supporting documentation, including this checklist, no later than 5 PM on Friday, September 27th 2024 to: [miriam@visitdublinga.org](mailto:miriam@visitdublinga.org)**

**Late or incomplete materials will not be accepted.** Applications will only be accepted by email.

Application and supporting documents must be submitted in PDF form. Applications can be completed in versions of Microsoft Word or Excel, but must be converted to PDF prior to submitting the final application request.

Applicants may submit multiple emails or use Google Drive if all attachments cannot be sent within one email. Receipt of application will be confirmed by Visit Dublin GA within 48 hours of submission. Please apply early to avoid technical difficulties; no applications received following the 5 PM deadline on the due date will be accepted.

# FY25 Tourism Grant Program Application

## APPLICANT INFORMATION

Organization Name:

\_\_\_\_\_

Organization Type:

Non-Profit (documentation required)       Private Business

Other. Describe: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State /Zip: \_\_\_\_\_

Chief Officer of Organization (Name, Title): \_\_\_\_\_

Contact Person for Project: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

What is the total amount of grant funding that you are requesting? \_\_\_\_\_

Have you previously received any grant(s) from Visit Dublin GA?  Yes  No

If yes, complete the following:

Date of Grant: \_\_\_\_\_ Project: \_\_\_\_\_ Amount: \_\_\_\_\_

## PRODUCT INFORMATION

Product Name: \_\_\_\_\_

Description of Product: \_\_\_\_\_

\_\_\_\_\_

Product Category:  Festival/Event       Tourism Project Development

Marketing       Other

Product Type:  New       Continued       Expansion

Date you will begin work on the product: (Month/Year) \_\_\_\_\_

Date project scheduled for completion: (Month/Year) \_\_\_\_\_ OR

Date(s) if product is Festival/Event: (Month/Year) \_\_\_\_\_

### ECONOMIC IMPACT INFORMATION

Will your product attract overnight visitors from outside Laurens County?  Yes  No

If yes, how many hotel rooms do you anticipate using? \_\_\_\_\_

Please list hotels contracted, with estimated room blocks if applicable: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Will your product attract/influence local area citizens?  Yes  No

If yes, how? \_\_\_\_\_

Will your product create economic impact (i.e. restaurants, shopping, etc.)?  Yes  No

If yes, how? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

How is your attendance tracked and verified? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What is the expected total attendance for your festival, event or tourism product? \_\_\_\_\_

How many people outside of Laurens County will be exposed to your product? \_\_\_\_\_

What will be the primary benefits of your product for the hospitality community? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What additional comments can you provide that support the economic impact of this project?

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### SIGNATURES

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Signature of authorizing official

Date

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Signature of authorizing official

Date