



Duncan Convention and Visitor's Bureau
1330 Chisholm Trail Parkway
VisitDuncan.org
DuncanCalendar.com
800-782-7167

PART I of III: ADMINISTRATIVE INFORMATION

1. Name of Event _____

2. Number of Years Event Held _____

3. Date (s) of Event _____

4. Support requested from Duncan Convention and Visitors Bureau Hotel/Motel Tax Fund

\$ _____ Advertising _____ Direct Sponsorship _____ Hospitality Services

5. How, specifically, will the requested funding be used?

6. Has this event previously received funds from Duncan Convention and Visitors Bureau? _____

If yes, what amount was received? _____ When previous funding was received? _____

7. Sponsoring Organization

Name _____

Address _____

Point of Contact _____

Daytime phone/fax numbers _____

Email Address _____

8. Type of Organization (Brief description of activities and primary purpose: e.g. social, educational, athletic, personal development, etc.)

9. Description and history of event:

10. Is your organization: _____ Non Profit (If yes, please attach copy of 501c3 status letter)

_____ Private/For Profit

11. Attach a complete budget for current project as well as previous year's profit and loss statement if the event is not a start-up. Budget must include the following data:

*itemized expenses

*funds raised by contributions and other sources (sponsorships, grants, awards)

* projected use of any net profits

12. Attach a copy of your media coverage advertising plan including the amount financially committed to each media outlet. State all media coverage in print, radio, television, public service announcements, direct mail etc.

13. What publicity material will carry the Duncan Convention and Visitors Bureau credit line and/or logo?

(Credit line will read: **"FUNDING and/or SUPPORT FOR THIS EVENT IS PARTIALLY PROVIDED BY THE DUNCAN CONVENTION AND VISITORS BUREAU."**)

**PART II of III: ESTIMATED ECONOMIC
IMPACT**

1. Number of days the event will run (start time to end time) _____

2. Total number of participants expected in the event _____

3. Age groups and approximate numbers of persons in each age group expected to participate

4. Number of out-of-town guests expected _____

5. Total number of hotel / motel rooms expected to be occupied per night _____

6. How will hotel/motel rooms be tracked? _____

7. Will you reserve a block of rooms for this event at host hotels and if so, for how many rooms at which hotels?

8. Where and when event was previously held last year:

Dates _____

Name of host hotel/motel _____

Address of host hotel/motel _____

Point of contact at the hotel/motel _____

Telephone/fax number of the host hotel/motel _____

Total number of hotel room nights from previous year _____

Submit Parts I and II of this application at least 90 days prior to the event to:

Teri Jennings, Director
Duncan Convention and Visitors Bureau

P.O. Box 981, Duncan, OK, 73534
Office (580) 252-2900, Fax (580) 252-3799

