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Ross-Chillicothe Convention and Visitors Bureau Promotional Assistance Program

The purpose of the RCCVB Promotional Assistance Program is to provide cooperative funding to non-profit/profit organizations, attractions, and individual events in the Chillicothe and Ross County area for promotion of an event or program. Promotions will allow the Bureau to participate in the community by providing assistance to eligible candidates and provide an avenue for the organizers of the events to promote the activity thus increasing awareness and the potential for tourism visitation.

ELIGIBILITY

Non-profit/profit organizations, attractions, and special events may apply within the first five years of opening. All non-profit must provide proof of a 501C designation and a copy of the incorporation agreement must be made available upon request.

Promotional assistance program recipients are eligible to apply annually for the first five years of operation.

REQUIREMENTS/GUIDELINES

The following requirements must be met in order to apply/receive assistance from the program. Organizations, attractions, or individual special events who do not comply with these requirements may not be considered or receive promotional assistance:

1. Any non-profit/profit attraction, or special event may apply for assistance if the emphasis of the program is to increase tourism, by way of promotion, in and around the county. It is the responsibility of the non-profit/profit organization, attraction or event to state how it will result in a visitor staying overnight or extending their stay in Ross County and increase spending in all facets of the tourism industry. It must also state how the event will promote a positive image and increased visibility of the region's attractions, culture and heritage.
2. An application must be completed for assistance consideration.
3. An invoice and/or receipt will be provided to the Ross-Chillicothe Convention and Visitors Bureau for monies received.
4. Complete event information must be provided to the Ross-Chillicothe Convention and Visitors Bureau to promote the event and provide information to potential visitors.
5. A designated member of the event organization must sign for the monies received.

6. A post event survey must be returned to the Bureau within 30 days of the close of the event.
7. If the promotional assistance is of a tangible nature, (brochures, posters, flyers, or print advertising), the Ross-Chillicothe Convention and Visitors Bureau logo must be included on all print materials.
8. Funding will not be awarded for more than 50% of the marketing portion of the budget for the event/program specified in the grant application. An overall budget is required as part of the application for a marketing grant for the fiscal year the event or program will take place.
9. Upon approval of the grant application, the applicant will be provided with a Grant Agreement. Upon receipt of the executed Grant Agreement (signed and returned to CVB) two-thirds of the approved grant will be paid out to the applicant.
10. Applicants are required to provide measurable results of the marketing plan for the event/program in the Final Report. Steps must be taken to obtain performance data for completion of the Final Report. The remainder of the grant will be paid out within 30 days for receipt of the Final report. Final Reports are due within 30 days of the completion of the event/program.

AVAILABLE ASSISTANCE

Organizations may apply more than once during the Ross-Chillicothe Convention and Visitors Bureau fiscal year. Due to the need of many of our tourism partners, the Ross-Chillicothe Convention and Visitors Bureau reserves the right to determine the amount of assistance provided.

APPLICATION PROCESS

Applications must be received by April 15, 2017. This program is based on need and the amount of assistance available in a fiscal year. Assistance requests must be made in advance of the date of the event. Upon the depletion of the promotional assistance program, the program will be suspended until the following fiscal year. The Promotional Assistance funding in any fiscal year is based upon the overall expenses of marketing/promotion and operation of the Ross-Chillicothe Convention and Visitors Bureau. Amount of available monies is based on quarterly lodging tax receipts from the county.

Applications for promotional assistance will be the final decision of the Promotional Assistance Review Committee of the Ross-Chillicothe Convention and Visitors Bureau.

The Ross-Chillicothe Convention and Visitors Bureau reserve the right to change or amend this program without notice.



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Section 1: General Application Information (Attach additional sheets as needed.)

ORGANIZATION & EVENT /PROGRAM	
CONTACT PERSON (Name and Title)	
ADDRESS	
CITY	STATE ZIP
PHONE	FAX
E-MAIL	TAX I.D. #
SIGNATURE	DATE

AMOUNT APPLYING FOR:
PROGRAM/EVENT TITLE AND NARRATIVE DESCRIPTION:
HOW WILL THIS SPONSORSHIP FUNDING BE UTILIZED?
HOW WILL THIS SPONSORSHIP FUNDING DRIVE OVERNIGHT STAYS?

If applicable, how will flyers, posters, and/or brochures be distributed?

Explain how & where RCCVB would be credited for its contributions if this event/program were to receive funds:

Is there a mailing list that will be used for distribution of printed information? ___yes ___no If yes, how many names are on the list(s)?

If applicable, how has marketing been done for event/program in the past? (Include samples of past publicity, brochures, etc.)

What geographical area(s) will be targeted?

BUDGET

Attach overall budget for event/program.

Provide an itemized list of what will be purchased (and cost) with support from RCCVB. Be as specific as possible. NOTE: The total project may be any amount, but the RCCVB support will not exceed \$2500.00 or more that 50% of the event/program's overall expense.

Descriptions of requested item(s)	Estimated Cost \$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
Total Cost:	\$

Is your TOTAL COST \$2,000 or more? ___yes___no

If YES, your organization may request \$2500.00 grant.

If NO, your organization may request 50% of TOTAL COSTS.

AMOUNT REQUESTED FROM RCCVB: \$_____

Signature of Fiscal Agent: _____ Date: _____