



**Pocahontas County Convention and Visitors Bureau**  
***Calvin W. Price Appalachian Enrichment Series Application***

All applications must be received **no later than October 1.**

Any questions related to the Calvin W. Price Appalachian Enrichment Series, this application or the policies related to the Calvin W. Price Appalachian Enrichment Series, please call Linda Adams at 304.799.4636, or email [ladams@pocahontascountywv.com](mailto:ladams@pocahontascountywv.com)

**BACKGROUND INFORMATION:**

Date of Application: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Contact Email: \_\_\_\_\_

Contact's Signature: \_\_\_\_\_

Name of Proposed Event/Project: \_\_\_\_\_

Date of Event/Project: \_\_\_\_\_

Make Check Payable To (Be Exact): \_\_\_\_\_

**FINANCIAL INFORMATION:**

**Total Event/Project Cost:** \$ \_\_\_\_\_

**Amount Requested from PC CVB (MAX: \$1,000):** \_\_\_\_\_

**Have you applied to other West Virginia or Pocahontas County organizations (such as West Virginia Humanities Council, Dramas, Fairs, & Festivals, PC Parks & Receptions, WV MAPP, etc.) for this event/project?**

Yes \_\_\_\_\_ No \_\_\_\_\_

*If yes, please provide details:*

Organization \_\_\_\_\_ Amount Requested/Granted: \$ \_\_\_\_\_

Organization \_\_\_\_\_ Amount Requested/Granted: \$ \_\_\_\_\_

Organization \_\_\_\_\_ Amount Requested/Granted: \$ \_\_\_\_\_

**Is your event FREE to the public?**

Yes \_\_\_\_\_ No \_\_\_\_\_

*If NO, what fees will you charge participants? Please explain:*

The CWPAES mission: *The Calvin W. Price Appalachian Enrichment Series grant program promotes continued tourism growth and encourages community-based tourism. The Series provides authentic, hands-on enrichment experiences to the public, including visitors and residents. An “authentic, hands-on enrichment experience” is defined as activities and learning experiences that promote public appreciation and interest in local culture through activity-oriented experiences like guided tours, demonstrations, workshops, interpretations, dramas, and other varied experiences that transfer the essence of our place to the traveler.*

*The CWPAES objectives include increasing visitation to the county, enhancing overall visitor experience, fostering overnight stays in the county, and encouraging “shoulder season” tourism product development.*

***Programs funded through the CWPAES grant do not qualify for any other CVB grant programs.***

***If you offer a quality program with specialists, certified speakers, or trainers, then it is up to you to augment your costs by imposing a small registration fee.***

**On the following page, please provide a breakdown of your total event/project expenses.**

Include marketing and all other anticipated expenses.

The Calvin W. Price Enrichment Series funds may be used for the entire project cost or a portion of the costs, but should support the foundation of the program as it qualifies for the program.

Itemized projected expenses (marketing, speaker stipends, refreshments, handouts, xerox copies, etc):	Dollar Amount
<b>Total Expenses</b>	

**EVENT/PROJECT DESCRIPTION**

How many people will be involved in or benefit from this project? \_\_\_\_\_

Is this a new event/program?

Yes \_\_\_\_\_ No \_\_\_\_\_

*If No, how many years has it been held and describe below the new elements that qualify for this grant?*

*If Yes, do you anticipate this being an annual event?* \_\_\_\_\_

Describe your event/project below. How will it provide an authentic, hands-on enrichment experience for visitors? Please outline your curriculum, include speaker/educator biography (*if applicable*) and if any fees will apply to participants/public.  
*(If needed, attach a separate piece of paper, but no more than three pages)*

Application approval must occur before the date of the proposed event/project. All monies must be utilized and accounted for within sixty (60) days of the completion of the event/project, or such monies must be returned in full to the Pocahontas County CVB. Please submit receipts for your expenses or submit a financial statement listing a check for each itemized amount. Please complete the mandatory summary report (*attached on the following page*) and submit with all financial statements and documents within sixty (60) days of the conclusion of the event/project. Please note a representative for the program/event must be present for the application review during the scheduled PCCVB Grant Committee meeting.

The Pocahontas County CVB will include the CWPAES events in the annual Visitor's Guide and promote the events/series on PocahontasCountyWV.com, and on our various social media channels. In addition, if you prepare press releases for your event, the PCCVB staff will also assist you in distributing the media information, if you so desire. Press releases must be provided at least 3 weeks in advance.

**Date:** \_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_

**Pocahontas County Convention & Visitors Bureau  
Cal W. Price Enrichment Series**

**Summary Report**

This form must be filled out and returned within sixty (60) days after the conclusion of the event/project for which grant funds were provided.

CWPAES Event Name: \_\_\_\_\_

Date of the Event: \_\_\_\_\_

Business / Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: \_\_\_\_\_

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

Amount of Cal Price Enrichment Series Funds Granted: \$ \_\_\_\_\_

**Please explain how the grant funds were distributed and attach all applicable invoices or receipts for your expenses along with any advertising or marketing materials produced for this event (newspaper tearsheets, brochures, flyers, etc.)**

Estimated Attendance (if applicable): \_\_\_\_\_

How did you arrive at this figure?

Do you feel this project was a success?

Yes \_\_\_\_\_ No \_\_\_\_\_

Please explain more below:

Do you have any knowledge that this event generated lodging room nights in the county? Explain in more detail below:

Do you plan to repeat or participate in this event in the future?

*(If yes, please provide future planned dates if possible, to be added to the annual visitor guide)*

Were there any unused grant funds to be returned to the Pocahontas County Convention & Visitors Bureau?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what is the amount? \_\_\_\_\_

**If any grant funds were unused, please enclose a check for the balance, payable to the Pocahontas County Convention & Visitors Bureau.**

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Please mail to:**

Pocahontas County Convention & Visitors Bureau  
P.O. Box 275  
Marlinton, West Virginia 24954  
Phone: 304-799-4636

*Questions?*

*Linda Adams: ladams@pocahontascountywv.com*  
*Phone: 304.799.4636*