



POCAHONTAS COUNTY CONVENTION & VISITORS BUREAU
Event Marketing Grant Application

Recipients of PCCVB grants must agree to all terms outlined in the written grant policies.

SECTION I: Applicant Information

Business/Organization: _____

Contact Person: _____

Address: _____

Telephone: _____

Email: _____

Website: _____

Social Media: _____

SECTION II: Event Information

Event Name: _____

Event Date(s): _____

Please provide detailed description of event:

How will this event benefit tourism and how is it expected to contribute to overnight stays?



Estimated total attendance (including residents and visitors): _____

SECTION III: Budget

Total estimated event budget: _____

PCCVB Event Marketing Grant Request: _____

Would you like the PCCVB to mail your events brochures/rack cards to the WV State Visitor Centers?

() Yes () No

Have you or do you plan to request additional funds from another county organization for this event?

() Yes () No

If yes, please provide more information about the request(s) below:

Organization Awarding Funds Amount Received/Requested (\$)

- 1.
- 2.
- 3.

Have you request grant funding from the PCCVB before?

() Yes () No

SECTION IV: Insurance Information



Do you or does your event carry liability insurance coverage for this event? _____

**Please provide a copy of the insurance certificate with this application.*

Name of Insurance Agent: _____

Name of Insurance Company: _____

Insurance Agent Telephone Number: _____

SECTION V: Agreement

The contact person or representative must present the request in person at the PCCVB Event Marketing Grant Committee meeting (date/time will be provided) for the first two years of this grant request. The Event Marketing Grant Committee meets quarterly in January, April, July and October. Please contact the event grants coordinator, Linda Adams, ladams@pocahontascountywv.com, if you have any questions.

This application must be completed and returned to the PCCVB Event Marketing Grant Coordinator at least two weeks prior to the quarterly meeting. The PCCVB reserves the right to reject all grant funding requests. The recipient must provide the PCCVB with the Summary Report and final breakdown of how the grant funds were expended within 60 days of the conclusion of the event.

Any funds distributed to the grant recipient in advance that were unused or misused must be repaid to the PCCVB within 60 days of the conclusion of the event. The PCCVB reserves the right to pursue all available avenues pursuant of West Virginia state laws to recover these funds. The event/grant contact person agrees to make the PCCVB a Facebook Event co-host. The PCCVB will assist you in creating a Facebook event, if needed.

The undersigned agrees to these stated conditions and the written event marketing grant policy.

Signature of Contact Person: _____

Date: _____



EVENT MARKETING GRANT REQUEST: MEDIA BREAKDOWN

85% of funds must reach audiences beyond 50 miles of event location

EXAMPLE				
Name of Publication	Target Audience	Issue Date	Number & Ad Specs	Cost
Charleston Gazette	Charleston/Metro Valley	Sunday edition, August 23 & 30	2 ads; 3Col X 4"	\$500.00

Print Publications				
Name of Publication	Target Audience	Issue Date	Number/Size of ads	Cost
Name of Station	Target Market	Quantity	Specifications	Cost
Printing Expenses				
Description	Target Market Distribution Plan	Quantity	Size/specifications	Cost
Digital/Social Marketing				
Description	Target Market	Schedule	Specifications	Cost
*Must be giveaways		Promotional Items	*no more than 15% of this grant budget	
Description	Logo placement/size	# of giveaway items	Date artwork approved by CVB	Cost
		CVB Event Brochure Distribution Option	\$50 postage fee for this optional Service	\$
			TOTAL COST of Grant Funds requested	\$



EVENT CALENDAR LISTING FORM

Required at the time of grant application.

The PCCVB will list your event on our web calendar at PocahontasCountyWV.com and the West Virginia Department of Tourism's statewide event calendar.

Title of Event: _____

Start Date/Time: _____

End Date/Time: _____

Event Location & Physical Address: _____

Directions to Event:

Event description for website:

If an annual event, tentative event dates for next year: _____

*Please attach these files to your application, or email them to Jake Hyer at jhyer@pocahontascountywv.com: photos, videos, schedule of events, vendor forms, etc.