

Participants:



## Dauphin Adventure Fund Application Form

						Updated February 202
		Section 1:	Event Deta	ils		
Name of Organization Applying:						
Contact Person:						
Phone:				Email:		
Name of Event:						
Is this a NEW event?	Yes	No 🗌			-	w events but also supports ate growth or innovation.
If you selected 'No', please describe new elements being introduced this year or how your event has grown compared to previous years.						
Description of Event:						
Event Date(s):	Start Date:				Finish Date:	
Between the ho	urs of	and the h	iours of			(or) all day
Event Location:						
	Section 2	2: Participan	its and Econ	nomic Im	pact	
Number of Anticipated			Estimate	d Numbe	r of Hotel	

Rooms Booked Per Night:

Section 3: Funding Request							
Amount Requested:							etailed budget including and expenses.
Intended Use of Funds:							
Section 4: Contingency and Sponsorship							
Will this event still happen if you do not receive full funding?	Yes		No		Include any	y sponsorship amount: your attached	s in the Revenue section of budget.
Are you seeking local sponsorship to support your event?	Yes		No		you aiming	r much funding are g to secure through onsorship?	

A member of the review committee may request an interview with the contact person for more information and details o the event and the purpose of the funding. Submit your application form and detailed budget by email at tourism@dauphin.ca or drop it off at the Tourism Dauphin office located at 100 Main Street South.

## EXAMPLE BUDGET TEMPLATE

REVENUE	AMOUNT (\$)
Ticket Sales (# of tickets at \$x.xx)	
Bar Sales	
Sponsorships	
Grants	
Dauphin Adventure Fund	
50/50 or Raffles	
Other	
Total Revenue	
Expenses	.`™.JUNT (\$)
Facility Rental	
Advertising/Marketing	
Equipment	
Food/Catering	
Port-A-Potties	
Speakers' Juide/Co. sultant Fee	
Officials/h_friees	
Insurance	
Entertainment	
Miscellaneous costs	
Total Expenses	
NET PROFIT/LOSS	