

This Information to be completed by CAPC:

Date Received \_\_\_\_\_

Date Approved for processing \_\_\_\_\_

Date of Notification if incomplete \_\_\_\_\_

Date of Final Notification \_\_\_\_\_

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**EUREKA SPRINGS  
CITY ADVERTISING & PROMOTION COMMISSION  
FUNDING SUPPORT REQUEST APPLICATION FOR  
PRIVATELY ATTENDED CONVENTIONS/MEETINGS  
AND PUBLIC EVENTS**

Name of Organization \_\_\_\_\_

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

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Alternate Contact Person \_\_\_\_\_

Telephone Numbers for Alternate \_\_\_\_\_

Is this a non-profit organization? \_\_\_\_\_ Non-profit tax ID # \_\_\_\_\_

**GROUP HISTORY**

Number of Years in Existence \_\_\_\_\_ Number of total lodging place room nights  
anticipated \_\_\_\_\_ Number of total attendees anticipated \_\_\_\_\_ Number of total lodging  
place nights generated in each of the past two years \_\_\_\_\_ \_\_\_\_\_ Number of total  
attendees in each of the past two years \_\_\_\_\_ \_\_\_\_\_ Location of event in each of the past  
two years \_\_\_\_\_

Goal(s)/History of Group \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**FUNDING SUPPORT REQUEST**

Name of Event \_\_\_\_\_

Date(s) of Event \_\_\_\_\_ Admission Charge \_\_\_\_\_

Amount of Funds Requested \_\_\_\_\_

Proposed Use of Funds \_\_\_\_\_

Other information to support request \_\_\_\_\_

It is required that you attach a specific advertising budget by medium to this request. Detail of direct mailings is required.

**FINANCIAL INFORMATION**

First year events, please attach your projected event budget.

Cost for Event Last Year \_\_\_\_\_ Profit for Event Last Year \_\_\_\_\_

How was the profit used \_\_\_\_\_

What is the total budget amount for this year's event \_\_\_\_\_

How will the profit generated by this event be used this year \_\_\_\_\_

Request Submitted By \_\_\_\_\_

Date \_\_\_\_\_

**THIS REQUEST WILL NOT BE CONSIDERED UNTIL ALL REQUESTED INFORMATION IS PROVIDED TO THE COMMISSION.**

Applications should be submitted directly to: Eureka Springs CAPC

P O Box 522

Eureka Springs, AR 72632

Fax: 479-363-9380

Applications not accepted by e-mail.

For technical assistance or to discuss proposals contact: CAPC Executive Director at 479-253-7333.