



Date Received - Date Stamp

## SPECIAL EVENTS ASSISTANCE PROGRAM APPLICATION

### EVENTS WHERE CITY COSTS ARE FUNDED

The City Commission shall on a case by case basis approve special events for which some or all the costs of City fees and/or resources are subsidized through a specially funded account. For funding consideration, the event must be held in the City of North Port and meet the guidelines outlined in City Special Events Assistance Program Guidelines and the Unified Land Development Code Chapter 3, Section 3.10.1. Special Events.

### INSTRUCTIONS

The applicant shall submit to the Parks & Recreation Department, a completed Special Events Assistance Program application. The application will be presented to the City Commission at the next available regularly scheduled meeting to consider the applicant's request for funding and either approve or deny the request. The funding amount, if granted, will be applied directly to City fees and/or resources; it shall be the responsibility of the applicant to pay the difference. A special event permit is not required at the time of application for assistance, however if an issued special event permit is required for the event, the applicant shall follow the guidelines for the special event permitting process.

### GENERAL INFORMATION

Applicant:

Is the applicant:    Individual    Corporation    501c3    Other \_\_\_\_\_

Contact Person:

Address:

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone No: \_\_\_\_\_ Cell No.: \_\_\_\_\_

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

Preferred means of contact: \_\_\_\_\_



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### EVENT INFORMATION

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

Is the event open to public?    Yes    No    Admission charged?    Yes    No

*If the event is not open to the public and/or admission charged, the event does not qualify for the program.*

Location Address: \_\_\_\_\_

Date(s) of Event: \_\_\_\_\_ Hours (start & end): \_\_\_\_\_ Expected Attendance: \_\_\_\_\_

Amount of Request \$ \_\_\_\_\_ Financial Need:    Yes    No

Will this event occur without financial assistance?    Yes    No

Event is (check one):    One-time event    Annual event

If annual event, how many years has your organization been holding this event? \_\_\_\_\_

Prior funding from City:    Yes    No    If yes, amount received \$ \_\_\_\_\_

Description of Event: \_\_\_\_\_

### AFFIDAVIT OF APPLICATION:

I certify that the information contained in this application is true and correct to the best of my knowledge, that I have read and understood that if funding is approved, I agree to abide by the guidelines and procedures governing this program.

Signed by Applicant \_\_\_\_\_

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

Please Print Name \_\_\_\_\_