Stillwater
OKLAHOMA
Economic Development
Authority

2016
Meeting and Event Grant Policy and Application Guidelines
(updated 2/3/2016)

OVERVIEW:

Grants from the Stillwater Economic Development Authority (SEDA) are available for meetings and events that meet the established criteria.

Weddings, Wedding Parties and/or single year private events – such as class reunions – are not eligible to receive a Grant.

SEDA contracts with Visit Stillwater OK, Inc. – representing Visit Stillwater – for all professional services related to visitor development. This organization will receive applications and make recommendations to SEDA.

Marketing and promotion opportunities are available to all meeting and event planners through Visit Stillwater OK, Inc. (summary available upon request).

REVIEW CRITERIA:

Visitor Spending: Number of anticipated out of town attendees per day and number of visitors spending the night in local hotels.

Consult the Visit Stillwater OK, Inc. Community Calendar of Events at www.VisitStillwaterOK.org to ensure your date does not conflict with other meetings or events, especially those requiring lodging accommodations.

Visit Stillwater OK, Inc. will review applications and make recommendations to the Stillwater Economic Development Authority.

REQUIREMENTS FOR CONSIDERATION:

PRE-EVENT:
· To save time, utilize the services of the Visit Stillwater OK, Inc. team to create a booking lead to send to all local hotel partners, in order to collect rate information on hotel group room blocks.
· Estimate number of out of town attendees for event (actuals must be provided post event).
· Copy of Organizations W-9 Form
· "VisitStillwaterOK.org" logo within all pre-event print, website, and social media coverage.
· Grant applications are subject to approval by the Stillwater Economic Development Authority through a recommendation by the Visit Stillwater OK, Inc. team.

POST-EVENT:
· "VisitStillwaterOK.org" logo within all post-event print, website, and social media coverage.
· Copies of each print promotion and screen shots of website and social media coverage must be provided to the Visit Stillwater OK, Inc. team.
· "Post Meeting / Event Grant Accountability Form" must be completed and submitted to the Visit Stillwater OK, Inc. office no later than **30 days** following meeting or event (provided).

When blocks are coordinated through the Visit Stillwater OK, Inc. team –

· "Group History - Room Pickup Report" must be completed and submitted to the Visit Stillwater OK, Inc. office no later than **30 days** following meeting or event (provided).

All forms must be completed with appropriate documentation for the request to be successfully processed.

Incomplete submissions will not be accepted or reviewed for acceptance.

APPLICATION PROCESS:
- Application must be turned in no later than 30 days prior to the meeting or event. A minimum of 90 days is recommended to ensure applicant time to secure alternate sources of funding if needed.
- The application must be fully completed and include all supporting documentation.
- If post meeting or event reports are not returned within 30 days, meeting or event will **NOT** be considered for future grants.

The Visit Stillwater OK, Inc. team is happy to provide the appropriate forms and guidance. Contact us at:

FOR MORE INFORMATION:
VISIT STILLWATER OK, INC.
Nicole Rathbun, Director of Sales ● Nicole@VisitStillwater.org
2617 West 6th Avenue ● Stillwater, OK 74074
t: 405-743-3697 or 1-800-991-6717 ● f: 405-372-0765
visitstillwaterOK.org

Stillwater
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2016
Event Grant Application
(updated 2/3/2016)

Name of Applicant
Organization/Agency: _____
(Please spell out all names – no acronym.)

Year Founded/Established: _____

Type of Organization: _____

_____

_____

Name of Meeting/Event: _____
(Please spell out all names – no acronyms.)

Date(s) of Meeting or Event: _____

Beginning and Ending Time of Event: _____

_____

_____
(Please include daily times if meeting or event is multiple days.)

Brief Narrative Description of Meeting/Event: _____

_____

_____

Is meeting/event open to the public or private organization only? _____

Organization/Agency Website: _____

Organization/Agency Social Media: _____

Meeting or Event Website: _____

Meeting or Event Social Media: _____

EVENT HISTORY:

Number of Years Previously Held: _____

Location(s) of Previous Meeting or Event: _____

_____

Date(s) of Last Meeting or Event: _____

Host Hotel and/or Overflow Hotels of Last Meeting or Event: _____

_____

Reason for Considering Stillwater as Host Location: _____

_____

_____

_____

_____

Main Contact: _____

Title: _____

Address: _____

City / State / Zip: _____

Telephone: _____

Cell Phone: _____

E-mail: _____

Secondary Contact: _____

Title: _____

Address: _____

City / State / Zip: _____

Telephone: _____

Cell Phone: _____

E-mail: _____

Amount of Grant Requested: $ _____

Primary Use(s) of Grant: _____

_____

_____

List of Sponsors: _____

_____

_____

VISITOR SPENDING

Economic Benefit to Stillwater:

_____

_____

_____

Anticipated Visitor Spending in Stillwater:

      Total anticipated number of out of town attendees/visitors
          (participants, fans, family, spectators, coaches, officials, etc.)   = _____

      Day visitors = # of visitors _____ x # of days _____ x \$75 = $ _____

      Overnight visitors = # of visitors _____ x # of nights _____ x \$200 $ _____

                    Total Anticipated Visitor Spending: **$ _____**

Anticipated Total Number of Hotel Room Nights (# nights _____ x # rooms _____):   _____

Anticipated Stillwater Hotels to be used:

Host Hotel: _____   Overflow Hotels: _____

_____

_____

Anticipated Stillwater Meeting / Event Facilities to be used: _____

_____

_____

Please provide any additional comments that support the need for a Grant or how your meeting and/or event will enhance Stillwater as a travel destination.

_____

_____

_____

_____

_____

Name to appear on check: _____

Address to mail check: _____

City / State / Zip: _____

Attention: _____

Must provide Visit Stillwater OK, Inc. with a copy of your organization's W-9 Form in order to be processed.

"I agree all of the information included in this application is true to the best of our knowledge. We agree to provide all of the required post event information within 30 days of the conclusion of our meeting/event."

Signature _____
       (Authorized or Administrative Official)   (Title)

Date _____

Before submitting grant, please make sure
- o all pages have been filled out in their entirety. If a question is not answered, please state why it is not answered.
- o to sign application agreement.
- o to include a copy of the Organizations W-9 Form

2016
Post Meeting / Event Grant Accountability Form

MEETING/EVENT INFORMATION

Name of Meeting or Event: _____

Date(s) of Meeting or Event: _____

Overall Evaluation of Meeting/Event: _____

_____

_____

Evaluation of Visitor Spending in Stillwater: _____

_____

_____

Estimated Actual Visitor Spending in Stillwater:

     Estimated actual number of out of town attendees = [_____] :

        Day visitors = # of visitors [_____] x # of days [_____] x \$75 =   \$ [_____]

        Overnight visitors = # of visitors [_____] x # of nights [_____] x \$200   \$ [_____]

          Total Actual Estimated Visitor Spending: \$ [_____]

Estimated Total Number of Hotel Room Nights (# nights [_____] x # rooms [_____]):   [_____]

Marketing and Advertising Exposure: *Please attach a media coverage plan you used for the promotion of the event. Include copies of all newspaper, radio and printed materials (posters, fliers, pamphlets, press releases, direct mailing, etc.) screen shots of social media, and web promotions that were used*

If post meeting or event reports are not returned within 30 days, meeting or event will NOT be considered for future grants.

2016
Group History – Room Pickup Report

Complete the pickup history request below and return to Visit Stillwater Ok, Inc. no later than <u>30 days</u> upon the completion of your event. You will also need Group Room pickup reports from each Hotel Partner that was utilized.

Host Hotel Name: _____

Host Hotel Contact: _____

Rooms in Signed Rooming Agreement: Reserved

Date:	___ / ___	___ / ___	___ / ___	___ / ___	___ / ___	___ / ___	___ / ___	**Total:**
Number of Rooms each Night								

Rooms in Signed Rooming Agreement: Actual

Date:	___ / ___	___ / ___	___ / ___	___ / ___	___ / ___	___ / ___	___ / ___	**Total:**
Number of Rooms each Night								

Overflow Hotel(s) Name(s): _____

Overflow Hotel(s) Contact(s):_____

Rooms in Signed Overflow Rooming Agreement(s): Reserved

Date:	___ / ___	___ / ___	___ / ___	___ / ___	___ / ___	___ / ___	___ / ___	**Total:**
Number of Rooms each Night								

Rooms in Signed Overflow Rooming Agreement(s): Actual

Date:	___ / ___	___ / ___	___ / ___	___ / ___	___ / ___	___ / ___	___ / ___	**Total:**
Number of Rooms each Night								

(use extra copies of this form if needed for additional overflow hotels)

Total Number of Host Hotel & Overflow Hotel(s) Actual Rooms: _____

If post meeting or event reports are not returned within <u>30 days</u>, meeting or event will NOT be considered for future grants or sponsorships.

Return to:
VISIT STILLWATER OK, INC.
Nicole Rathbun, Director of Sales ● Nicole@VisitStillwater.org
2617 West 6th Avenue ● Stillwater, OK 74074
t: 405-743-3697 or 1-800-991-6717 ● f: 405-372-0765
visitstillwaterOK.org