



WALLA WALLA COUNTY LODGING TAX ADVISORY COMMITTEE (LTAC)

(Members: Seeking new business member;
Greg Lybeck, County Fairgrounds Manager; County
Commissioner Jennifer R. Mayberry; Randy Hinchliffe
and M. Brent White.

TOURISM FUND GRANT PROGRAM APPLICATION FY 2024

APPLICATION DEADLINE: October 2, 2023 by 4:00 p.m.

ELIGIBLE PERIOD: Projects occurring during calendar year 2024 ¹ (see note)

PRIMARY OBJECTIVES:

- 1) To promote tourism activities in Walla Walla County
- 2) To encourage activities that would promote overnight stays or benefits businesses in Walla Walla County.
- 3) To encourage cooperative partnerships between Walla Walla County organizations and to better leverage limited financial resources in marketing Walla Walla County as a visitor destination.

***NOTES:**

¹ Verification of expenditures will be **required**. Reimbursement requests for 2024 grants cannot be honored after December 31, 2024 for 2024 expenditures, and must be dated FY 2024.

Please read carefully and include all information. Omitting requested information could result in having your application denied. Keep your answers clear, concise, and to the point of the question. **Do not include brochures or information not related to your project or request.**

Please fill in the application form (one side only, please), print, sign, and submit one complete signed original application to the Walla Walla County Lodging Tax Advisory Committee (see mailing, physical and email addresses below) by the application deadline listed at the top of this application. **NO LATE APPLICATIONS WILL BE ACCEPTED. Even if postmarked earlier, applications will not be accepted if received after the application deadline.**

Applicant Information

Organization Name			Website address		
Street Address			Mailing Address (if different from street address)		
City	State	Zip	City	State	Zip
Phone	Fax		Name of Executive Director/President		
Type of Organization ▶ <input type="checkbox"/> 501 (c) 3** <input type="checkbox"/> 501 (c) 6** <input type="checkbox"/> Government Agency <input type="checkbox"/> Municipality ** <input type="checkbox"/> Non-Profit Determination Non-profit organizations must submit tax-exemption determination letters from the United States Internal Revenue Service. <u>Must hold status at time of application AND proof of status must be provided – REQUIRED ANNUALLY</u>			Founding Year	Number of Staff	
Organization Tax ID Number		Organization's Unified Business Identifier (UBI)		UBI Expiration Date	

Applicant Designated Contact Information

Name		Position/Title	
Work Phone	Cell Phone	Email Address	

Organization's mission statement

Social Media

Website Address	Facebook Page
Twitter Username	Instagram Username

List any other social media your organization uses to promote tourism:

Project Information

Project Name

Amount requested from Walla Walla County

Total Project Amount

Project Description

Please provide a brief description of the proposed 2024 project/activity, including date(s)/time frame.

Describe the goals of the project/activity.

Will the project/activity result in an increase of overnight stays? YES NO

If yes, how will this increase be tracked and measured? (See **NOTES** on next page)

What other short or long term economic benefits will occur and how will that be tracked?

ATTENDANCE PROJECTED

To help with assessing each grant application, and to comply with state reporting requirements, the following information is REQUIRED. **Grant recipients must also track and will be required to report attendance** (see NOTES below).

- A.) Overall Attendance PROJECTED _____
- B.) Fifty Miles Attendance PROJECTED _____
- C.) Out of State/Out of Country Attendance PROJECTED _____
- D.) Overnight **Paid** Attendance PROJECTED _____
- E.) Overnight **Unpaid** Attendance PROJECTED _____
- F.) Paid Lodging Attendance PROJECTED _____

NOTES:

- 1) **Applicants applying for use of lodging tax funds must provide estimates of how it will result in increases in the number of people traveling for business or pleasure on a trip as required by RCW 67.28.1816.**
- 2) **For state reporting purposes, successful applicants MUST provide information based upon the following. The methodology options are below. PLEASE KEEP THIS INFORMATION IN MIND AS IT MUST BE REPORTED BY GRANT RECIPIENTS IN THE REQUIRED RECAP FORM (TO BE PROVIDED SEPARATELY).**
 - *Direct Count*: Actual number of visitors using methods such as paid admissions or registrations, clicker counts at entry points, vehicle counts, or number of chairs filled. A direct count may also include information collected directly from businesses likely to be affected by an event (such as hotels, restaurants, or tour guides).
 - *Indirect Count*: Estimate based on information related to the number of visitors, such as number of raffle tickets sold, redeemed discount certificates, brochures handed out, police requirements for crowd control, or visual.
 - *Representative Survey*: Information collected directly from individual visitors/participants. A representative survey is a highly structured data collection tool, based on a defined random sample of participants, and the results can be reliably projected to the entire population attending an event and includes a margin of error and confidence level.
 - *Informal Survey*: Information collected directly from individual visitors/participants in a non-random manner that is not representative of all visitors or participants. Informal survey results cannot be projected to the entire visitor population and provide a limited indicator of attendance because not all participants had an equal chance of being included in the survey.
 - *Structured Estimate*: Estimate produced by computing known information related to the event or location. For example, one such estimate was determined by dividing the square footage of the event area by the international building code allowance for persons (3 square feet).
 - *Other*: Please describe and be specific.

Project Budget below is to reflect requested Tourism Grant funds ONLY

Project Budget – Marketing/Promotion

1. Media

- A. Newspaper \$
- B. Magazine \$
- C. Web-based advertising \$
- D. Social Media \$
- E. Radio \$

2. Printing Costs

- A. Brochures \$
- B. Direct Mail \$

3. Trade Show

- A. Registration Fee \$
- B. Trade Booth \$

4. Tourism Research

- A. Survey \$

5. Other

(Provide details below) \$

	Lodging Tax Funds		
Marketing/Promotion (Includes trade shows, branding, marketing campaigns, sales and related travel, website design & development, etc.) <i>Do not include personnel costs</i>	\$		
TOTAL	\$		

The applicant organization hereby certifies and confirms: That it does not now nor will it during the performance of any contract or activity resulting from this proposal unlawfully discriminate against any employee, applicant for employment, client, customer, or other person(s) by reason of race, ethnicity, color, religion, age, gender, national origin, or disability. That it will abide by all relevant local, state, and federal laws and regulations. That it has read and understands the information contained in this application for funding and is in compliance with the provisions thereof, and that the individual signing below has the authority to certify to these provisions for the applicant organization, and declares that he/she is an authorized official of the applicant organization, is authorized to make this application, is authorized to commit the organization in financial matters, will assure that any funds received as a result of this application are used for the purposes set forth herein, and verifies that all the information contained in this application is valid and true to the best of his/her knowledge.

Certified By: Signature ▶		Date
Print or Type Name and Title		

CHECKLIST FOR COMPLETE APPLICATION PACKET:

- Completed application _____
- Non-Profit status proof (REQUIRED if applicable) _____
- Certification page _____

Applications are due October 2nd. No exceptions. No late applications will be accepted.

WALLA WALLA COUNTY LODGING TAX ADVISORY COMMITTEE
TOURISM FUND GRANT PROGRAM APPLICATION FY 2024

Certification

"I/we hereby certify that _____ represents (Organization name) _____, and has/have the authority to speak for and bind the Organization by his/her/my signature. I/we hereby certify that the information supplied in this application is true and correct and that I/we have read and understood the procedures and guidelines that govern this grant. I/we certify that no in-kind services have been used to match any portion of this grant and that each partner identified in the application has been notified and consents to the application. Further, I/we acknowledge that any variance to the procedures and guidelines governing this program may result in non-reimbursement of any or all expenditures connected with this grant".

Name (Print): _____

Signature: _____

Title: _____

Date: _____

Walla Walla County agrees to reimburse based on compliance with all procedural rules and guidelines set forth in this program, and state and county auditing and accounting principles.