Tourism Grant Application

**Mission:** The purpose of the Clarendon Hotel Occupancy Tax (HOT) Fund is to provide funds to enhance Historical Restoration, the Preservation of the Arts and other activities which will increase tourism and Hotel/Motel usage in Clarendon, Texas.

**Program Guidelines:** The Clarendon Economic Development Corporation (CEDC) administers the Clarendon HOT Fund and will accept applications for program funding throughout the year. *The board holds regular meetings on the first Monday of each month. Applications should be submitted at least at five (5) days before a stated meeting.* The committee will only accept and review applications from non-profit, governmental, and community based organizations that meet the funding guidelines. All requests for funds should be submitted on the official application. The applicant may be asked to be present at a meeting to answer any questions regarding the application. Applicants will be notified prior to meeting of time and location. The CEDC Board will review applications and make funding decisions and those decisions are final.

**Eligibility and Priority for Hotel Tax Funds:** Priority will be given to those events and entities based on their ability to generate overnight visitors to Clarendon.

If an event will not generate any meaningful hotel night activity, it is not eligible for receipt of hotel occupancy tax funds. Events can prove this potential to generate overnight visitors by:

- **a)** Historic information on the number of room nights used during previous years of the same events;
- **b)** Current information on the size of a room block that has been reserved at area hotels to accommodate anticipated overnight guests attending the event requesting hotel tax funds;
- **c)** Historical information on the number of guests at hotel or other lodging facilities that attended the funded event; and/or
- **d)** Providing examples of marketing programs and activities that are likely to generate and encourage overnight visitors to local lodging properties.

**Partnerships:** The CEDC encourages all event organizers to consider partnership agreements with other applicants to promote events. Cooperation between entities can result in more effective use of funds. Priority will be given to applications that show cooperative efforts between entities.
**Use of Local Vendors:** All event organizers are encouraged to patronize the City of Clarendon businesses for food, supplies, materials, printing, etc.

**Allocation of Funds:** Applicants are advised to request only an amount for which they may qualify and can justify based on the number of expected participants and the number of rooms expected to be occupied in local hotels/motels.

**Use of Revenues from Event:** A portion of the revenues from any event and/or project receiving any type of funding assistance from the Hotel Occupancy Tax funds should be channeled back into the future costs of operating that same event or the continued operation of the project.

**Supplemental Information Required With Application:** Along with the application, please submit the following:

- Marketing Plan for Proposed Event
- Schedule of Activities or Events Relating to the Proposed Project

**HOTEL OCCUPANCY TAX USE GUIDELINES UNDER TEXAS STATE LAW AND FUNDING APPLICATION FORM**

The City of Clarendon collects a Hotel Occupancy Tax (HOT) from hotels, motels, and bed & breakfasts. Under state law, the revenue from the HOT may be used only to directly promote tourism and the convention and hotel industry. The use of HOT funds is limited to:

1. **Convention Centers and Visitor Information Centers:** the acquisition of sites for and the construction, improvement, enlarging, equipping, repairing operation and maintenance of convention center facilities or visitor information centers, or both;

2. **Registration of Convention Delegates:** the furnishing of facilities, personnel, and materials for the registration of convention delegates or registrants;

3. **Advertising, Solicitations and Promotions that directly promote Tourism and the Hotel and Convention Industry:** advertising and conducting solicitations and promotional programs to attract tourists and convention delegates or registrants to the municipality or its vicinity;

4. **Promotions of the Arts that directly promote Tourism and the Hotel and Convention Industry:** that the encouragement, promotion, improvement, and application of the arts, including instrumental and vocal music, dance, drama, folk art, creative writing, architecture, design and allied fields, painting, sculpture, photography, graphic and craft arts, motion picture, radio, television, tape and sound recording, and other arts related to the presentation, performance, execution, and exhibition of these major art forms, and

5. **Historical Restoration and Preservation Activities that directly promote Tourism and the Hotel and Convention Industry:** historical restoration and preservation projects or activities or advertising and conducting solicitation and promotional programs to encourage tourists and convention delegates to visit preserved historic sites or museums.
6. **Sporting Event Expenses that Substantially Increase Economic Activity at Hotels:** Expenses including promotional expenses, directly related to a sporting event in which the majority of participants are tourists. The event must substantially increase economic activity at hotels within the city or its vicinity.

7. **Funding transportation systems for transporting tourists from hotels to and near the city to any of the following destinations:**
   
   a) the commercial center of the city;
   b) a convention center in the city;
   c) other hotels in or near the city; or
   d) tourist attractions in or near the city.

8. **Signage directing tourists to sights and attractions that are visited frequently by hotel guests in the municipality.**
Tourism Grant Program
Funding Request Application

Organization Information  Date: _________________

Name of Organization: __________________________

Address: ______________________________________

City: State:_____________________________________ Zip:____________________

Contact Name:______________________ Contact Phone Number: ________________

Web Site Address for Event or Sponsoring Entity: ______________________________

Is your organization: Nonprofit ☐ Private/For Profit ☐ Tax ID #:_________________

Name of Event or Project:_________________________________________________

Partner Entity (if applicable): ________________________________________________

Date of Event or Project:__________________________________________________

Start Time/End Time of the Event:__________________________________________

Primary Location of Event or Project: ________________________________________

Has this Event/Facility been held before? If yes, please list the years: _______________

Please list any additional Co-Sponsors of the Event:_____________________________

Please list any other organizations, government entities and grants that have offered financial support to your project:________________________________________________________

Please list any contributions that are made to the community of Clarendon as a result of funds generated from the event (scholarships, donations, etc.): ____________________________________________________________
Do you intend to request support from businesses in the form of sponsorships, donations, materials, or other means that will assist you in executing the event? Yes____ No_____

Is this a ticketed Event/Facility? If yes, please list price of ticket, admission, entry fee: ________

HOT Amount Requested:_______________________

Percentage of Hotel Tax Support of Related Costs

_______(%) Note Percentage of Total Event Costs Covered by Hotel Occupancy Tax

_______(%) Note Percentage of Total Facility Costs Covered by Hotel Occupancy Tax for the Funded Event

_______(%) Note Percentage of Total Marketing Costs Covered by Hotel Occupancy Tax for the Funded Event

_______(%) Note Percentage of Staff Costs Covered by Hotel Occupancy Tax for the Funded Event

Purpose of Funds Request (including proposed use of funds) _____________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

Explain how this expenditure will DIRECTLY enhance and promote tourism AND the convention and hotel industry _____________________________________________
______________________________________________________________________
______________________________________________________________________

Check Which Categories Apply to Funding Request and Amount Requested Under Each Category:

☐ Convention Center or Visitor Information Center: construction, improvement, equipping, repairing operation and maintenance of convention center facilities or visitor information centers, or both $ ____________

☐ Registration of Convention Delegates: furnishing of facilities, personnel, and materials for the registration of convention delegates or registrants; $ ____________

☐ Advertising, Solicitations, Promotional programs to attract tourists and convention delegates or registrants to the city $ ____________

☐ Promotion of the Arts that Directly Enhance Tourism and the Hotel & Convention Industry: encouragement, promotion, improvement, and application of the arts, including instrumental and vocal music, dance, drama, folk art, creative writing, architecture, design and allied fields, painting, sculpture photography, graphic and craft arts, motion picture,
radio, television, tape and sound recording, and other arts related to the presentation, performance, execution, and exhibition of these major art forms; $_____________

☐ Historical restoration and preservation projects or activities or advertising and conducting solicitation and promotional programs to encourage tourists and convention delegates to visit preserved historic sites or museums; $_____________

Questions for All Funding Requests

Historical Narrative

Please provide a brief description of your agency’s history and background. (May be provided on separate page) Points are awarded on the basis of how established your program is, past successes, etc. More points will be awarded for entities that have a proven track record of stability and staying within budget.

Mission Statement:______________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Background: ___________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Needs Statement

Explain why you are requesting funds from the Clarendon HOT Funds. (May be provided on a separate page) How does your organization meet the needs of the community?

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Proposed Revenues and Expenditures. If you partner with another applicant please include their budget information. (May be provided on a separate page)

Proposed Revenue Budget Description

<table>
<thead>
<tr>
<th>Source</th>
<th>Previous Year</th>
<th>Current Year</th>
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<tbody>
<tr>
<td>Clarendon EDC / HOT Funds</td>
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<tr>
<td>Donley County</td>
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<td>Grants</td>
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<td>Donations</td>
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<td>Other</td>
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<td>Total</td>
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### Proposed Expenditure Budget Description

<table>
<thead>
<tr>
<th>Line Item</th>
<th>Previous Year</th>
<th>Estimated</th>
<th>Funded by Hotel/Motel Tax</th>
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### Goals, Objectives and Measures

How many years have you held this Event or Project: __________________________

Estimated Attendance: __________________________. How many people attending the Event or Project are anticipated will use hotels, motels or bed & breakfasts in the city?

How many nights will they stay: __________

Do you reserve a room block for this event at an area hotel or motel and if so, for how many rooms and at which hotels:

<table>
<thead>
<tr>
<th>No. Rooms</th>
<th>Name of Hotel/Motel</th>
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Please list other years (over the last three years) that you have hosted your Event or Project with amount of funding given from HOT and the number of hotel rooms used:

<table>
<thead>
<tr>
<th>Month/Year</th>
<th>Amount of Funding</th>
<th>Number of Hotel / Motel Rooms Used</th>
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Please check all promotion efforts your organization is coordinating and the amount financially committed to each media outlet:

- ☐ Paid Advertising $__________
- ☐ Newspaper $__________
- ☐ Social Media $__________
- ☐ Radio $__________
- ☐ TV $__________
- ☐ Press Releases to Media $__________
- ☐ Direct Mailing to out of town recipients $__________
- ☐ Other $__________

What areas does your advertising and promotion reach?
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

What number of individuals will your proposed marketing reach that are located in another city or county? Estimated _______________

If a permanent facility (e.g. museum, visitor center) Estimated Attendance: ____________ Monthly / ____________ Annually

Please note percentage of those in Attendance that are Staying at Area Hotel/Motels or other Lodging Facilities: ______________________

If this request for funding is denied, will the event be held regardless of funding support from the Clarendon EDC?  ____ Yes  ____ No

Other Comments: ________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Please feel free to attach any additional information about your organization or event that you think is relevant to this application.

I understand the limitations placed on use of Hotel Tax funds, and certify that the requested funds will be used only for purposes described in this application or as approved by the Clarendon Economic Development Corp. I understand use of funds is subject to audit and a post event form will be required. Applicant further understands that the CEDC may require surveys to be completed by attendees at the sponsored event and that failure to complete those surveys may have a negative impact of future funding requests.

__________________________________________  ____________________________  __________
Name       Title     Date

Return form to Clarendon EDC, PO Box 826, Clarendon, TX 79226, or in person at the Clarendon Visitor Center, 110 S. Kearney, Clarendon, Texas, or email to tourism@cityofclarendontx.com. For more information, call the Visitor Center at 806.874.2421.