

# Wilmington Events Program Fund Application

Complete 30 days Prior to Event

Name of Organization/Business/Committee \_\_\_\_\_

Mailing Address \_\_\_\_\_

EIN# \_\_\_\_\_ Attach a W-9 \_\_\_\_\_ Amount Requested \_\_\_\_\_

Please Attach Certificate of Liability Insurance (must match applicant name)

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

Location of Event \_\_\_\_\_ Contact Person \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Is this event partnered or co-sponsored with any other group? \_\_\_\_\_

If so Who? \_\_\_\_\_

Is this a new event? \_\_\_\_\_ If not, how long has this event been in existence? \_\_\_\_\_

Describe the Event? (How many people are expected, the audience you are attracting, the goal, how the event will benefit the town, how the event will be advertised, number of volunteers, etc.)

Please attach a detailed budget with cost estimates, grant request, matching cash and in-kind funds and anticipated revenues (if any expected). Itemize each expense for the total cost of the event with vendor name (i.e. posters, banners, decorations, materials, advertising, etc.).

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Title

Submit to: [smurphy@wilmingtonvt.us](mailto:smurphy@wilmingtonvt.us) or 2 East Main Street P.O. Box 217 Wilmington, VT 05363