Are you completing this application for – DROPDOWN Event or Season
Proposed name of the event/season
Name of Organization
Mailing Address
City, State, Zip Code
Federal Employer ID #
Website Address
Organization Telephone
Organization Email -
Primary Contact person (first & last name)
Primary Contact person Phone
Primary Contract person Email
Alternative Contact person (first & last name)
Alternative Contact person Phone
Alternative Contact person Email

If awarded funding, how will the grant funds be used? (Check all that apply)

- Staff/Personnel
- Artistic Services
- Materials/Supplies
- Marketing
- Other General Operating Costs

Please provide a brief description of your organization. (This is for background information for the Committee and will not be scored)

- (1) Please describe the proposed event/season for which you are seeking funding from the FY 2022-2023 Cultural Support Grant Program. (Be brief & concise but answer the question fully)
- (2) How does your proposed event/season promote the Space Coast as a cultural destination? (Please answer the question fully in a concise manner)

- (3) Please describe any unique cultural qualities that will created publicity opportunities on a regional or national level to promote the Space Coast as a cultural destination. (Please describe in detail but be concise)
- (4) Provide your Marketing Plan, including suggested elements such as goals and objectives, target audience(s), specific marketing activities, timeline and budget.
- (5) Please describe in detail how you will measure and evaluate the success of your event/season?