

# AMATEUR ATHLETIC FUND

**Important:** Applicants must attach a copy of your IRS 501(c)(3) Determination Letter and a detailed event budget (revenue / expense report) to your application. Applications lacking this information will not receive grant consideration. The Amateur Athletic Fund does not provide funding for tournament entry fees, outside travel, lodging, meals, uniforms, equipment, coaches salaries, facility upgrades, capital campaigns, or events held outside Pierce County.

**Applicant's name:** \_\_\_\_\_

**Organization:** \_\_\_\_\_

**Street address:** \_\_\_\_\_

**City, State & Zip Code:** \_\_\_\_\_

**Daytime telephone:** (     ) \_\_\_\_\_ **Fax:** (     ) \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Does the organization have 501(c)(3) status (tax-exempt)?**     Yes \_\_\_\_\_ No \_\_\_\_\_

Please attach your IRS Determination Letter to your application

## EVENT HISTORY

**Official event name:** \_\_\_\_\_

**Briefly describe the event (type of sport; male, female, co-ed, etc.):** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Scope of event (check one):**     \_\_\_\_\_ Local \_\_\_\_\_ State

\_\_\_\_\_ Regional     \_\_\_\_\_ National     \_\_\_\_\_ International

<u>Previous hosts:</u>	<u>Year</u>	<u>City &amp; State</u>	<u>Venue(s)</u>
_____	_____	_____	_____
_____	_____	_____	_____

**Has this event ever been held in Pierce County?**     \_\_\_\_\_ Yes     \_\_\_\_\_ No

**If yes, when:**     **Month:** \_\_\_\_\_     **Year:** \_\_\_\_\_

**Where:**     **Venue:** \_\_\_\_\_     **City:** \_\_\_\_\_

## **EVENT FINANCIAL INFORMATION**

Please attach a detailed budget (revenue & expense report) to your application

What is the projected number of tickets that will be sold? \_\_\_\_\_

**Average ticket price:** \$ \_\_\_\_\_

**Event's total estimated revenues (all sources):** \$ \_\_\_\_\_

**Event's total estimated expenses:** \$ \_\_\_\_\_

**Net profit / (loss):** \$ \_\_\_\_\_

What portion of the event's proceeds will be kept by the local host? \_\_\_\_\_

## **VENUE INFORMATION**

**Proposed local venue(s):** \_\_\_\_\_

**Location:** \_\_\_\_\_

**Proposed date(s):** \_\_\_\_\_

Have you confirmed the availability of the proposed dates at the primary venue?

\_\_\_\_\_ Yes \_\_\_\_\_ No

Will you have need for secondary or practice venues?

\_\_\_\_\_ Yes \_\_\_\_\_ No

**Total venue rental (both competition and practice sites):** \$ \_\_\_\_\_

## ECONOMIC IMPACT

How many athletes will the event attract from outside Pierce County? \_\_\_\_\_  
How many spectators will the event attract from outside Pierce County? \_\_\_\_\_  
How many staff people will the event attract from outside Pierce County? \_\_\_\_\_

Of the numbers listed above, what percentage will require overnight lodging at a Tacoma-area hotel/motel?

Athletes	_____ %	Will a headquarter hotel be selected?	_____
Spectators	_____ %	HQ hotel/motel:	_____
Event Staff	_____ %	Others:	_____

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**GRANT AMOUNT REQUESTED:**                      \$ \_\_\_\_\_

Specify how these grant funds will be used?

Please list the other sources of financial support (sponsorships, etc.) being pursued:

Source:

_____	<b><u>Committed:</u></b> _____	Yes _____	No _____	<b><u>Amount:</u></b> \$ _____
_____	<b><u>Committed:</u></b> _____	Yes _____	No _____	<b><u>Amount:</u></b> \$ _____
_____	<b><u>Committed:</u></b> _____	Yes _____	No _____	<b><u>Amount:</u></b> \$ _____

Please use the following space to provide any additional information that should be taken into consideration in reviewing your grant request:

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**Applicant's Signature:** \_\_\_\_\_

**Applicant's Title:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please note: Grant requests are reviewed during the first month of each calendar quarter (January, April, July & October). Please take that fact into account when considering the timing of your request. **A post-event financial report is required of all grant recipients within 30 days after the event.**