



Saguache County Tourism Council Tourism Event Grant Application

Purpose

SCTC tourism grants are intended to support events and initiatives that attract visitors to Saguache County and generate economic benefit for the local community.

Core Eligibility Requirement

Does your event bring visitors from outside Saguache County? Yes No

If "No," this proposal is not eligible for tourism funding.

Eligibility Checklist. Please confirm:

- Event is open to the public (free or paid)
- Event has a clear structure (defined activities or experience)
- Event will be promoted beyond Saguache County
- Event has a defined plan (date, location, logistics)

Grant Funds MAY be used for:

- Advertising (newspaper, radio, paid social media)
- Design services
- Temporary event signage (banners, posters, flyers)
- Printing costs
- Branded promotional items

Grant Funds CANNOT be used for:

- General business expenses (rent, payroll, inventory, etc.)
- Private or invitation-only event
- An event primarily for local participation
- Permanent signage and/or infrastructure

Funding Overview

The first \$750 of funding does not require a match. Applicants may request up to an additional \$750 in 1:1 matched funds, for a maximum total award of \$1,500.

Funding Request

Base Amount Requested (up to \$750): \$ _____

1:1 Match Amount (if requesting over \$750): \$ _____ TOTAL REQUEST: \$ _____

Grants are awarded at the discretion of the SCTC and are available while funds remain.

Events that attract higher numbers of visitors may be prioritized.

Applicant Information

Organization / Applicant Name: _____

Contact Name: _____

Email: _____ Phone: _____

Check to be issued to (Name/Address): _____

Event Information

Event Name: _____

Event Date(s): _____

Location: _____

Brief Description of Event (2-3 sentences): _____

Total Event Budget & Description: (attach separately if needed)

DESCRIPTION

BUDGET

Visitor Impact

How does this event bring new visitors to Saguache County?

Estimated total attendance: _____

Estimated % of attendees from outside Saguache County: _____

Will this event encourage overnight stays? Yes No Unsure

If yes, how? _____

Economic Benefit

How will this event support local businesses?

(Check all that apply)

Lodging

Gas / Travel Stops

Restaurants / Food Vendors

Other: _____

Retail / Shops

Briefly describe expected economic impact: _____

Accessibility

Is the event: Free Ticketed. If ticketed, price range: _____

Are there any barriers to participation? (if yes, explain): _____

Promotion & Marketing Plan

How will you promote this event? (Check all that apply)

Social Media

Radio

Website

Paid Advertising

Email Marketing

Regional Outreach (Front Range, out-of-state, etc.)

Newspaper

Other: _____

Describe your marketing plan (include target audience and geographic reach): _____

Describe how Tourism Grant funds will be used: _____

Provide sketches or visuals if applicable.

Organizational Readiness

Have you hosted this event before? Yes No If yes, how many years? _____

Describe your team and ability to execute this event: _____

SCTC is available to support applicants:

- Reach out for guidance on your application
- We can help with promotional ideas and strategy
- If awarded, grantees will be provided a marketing toolkit, including examples of outreach beyond the local community.
- Grantees are encouraged to include the SCTC Brand on their marketing materials
- Grantees will be required to provide a current W-9 to the County prior to payment
- Consider promoting to regional or interest-based groups that align with your event
- Applicants are encouraged to ask attendees: "How did you hear about us?"

Application will not be considered if it is incomplete or lacks a clear marketing plan.

Recipients are required to submit a W-9 before funds will be issued.

I certify that the information provided is accurate and complete:

Signature: _____

Date: _____

Saguache County Tourism Council

Tourism Event Grant Final Report

Complete and submit to info@mystic-colorado.com within 60 days of the event.

Grantee Information:

Organization Name: _____

Contact Person: _____

Phone Number: _____ Email Address: _____

Event/Activity Name: _____

Event/Activity Date(s): _____

Event/Activity Location(s): _____

Event Summary:

Brief description of the event/activity (2–3 sentences): _____

Attendance:

Total estimated attendance: _____

Estimated number of visitors from outside Saguache County: _____

Impact:

How did the event/activity benefit the local community? _____

How did it contribute to tourism in Saguache County? _____

Budget Summary:

Total project cost: _____ Grant amount received: _____

Brief description of how grant funds were spent: _____

Signature: _____

Date: _____

Submit completed reports to: info@mystic-colorado.com