



## MAKE IT HAPPEN Event Marketing Funds

Please fill out this form as completely and accurately as possible. Incomplete forms may be returned or passed up for review. Questions should be directed to Travis Napper at [tnapper@rustonlincoln.com](mailto:tnapper@rustonlincoln.com).

Legal name of applicant organization: \_\_\_\_\_

Contact person: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip Code: \_\_\_\_\_

\_\_\_\_\_ Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Event name: \_\_\_\_\_

Event Date: \_\_\_\_\_ Website: \_\_\_\_\_

Site/location of event: \_\_\_\_\_

How often is the event held in Ruston/Lincoln Parish: \_\_\_\_\_

Revenue budgeted: \$ \_\_\_\_\_ Expenses budgeted: \$ \_\_\_\_\_

Projected daily attendance for event: \_\_\_\_\_

Percentage of attendees from out of town: \_\_\_\_\_

Projected daily hotel rooms for event: \_\_\_\_\_

Amount request from Experience Ruston CVB \$ \_\_\_\_\_

Date(s) of previous requests: \$ \_\_\_\_\_ Amount previously received: \$ \_\_\_\_\_

### EVENT HISTORY

Previous year's attendance: \_\_\_\_\_ Percentage from out of town: \_\_\_\_\_ Total number of hote rooms: \_\_\_\_\_

\_\_\_\_\_

