

Advertising Request 2019

Date of Application: _____

Organization: _____

Address: _____

Contact Person: _____

Email: _____ Phone: _____

Event/Project: _____

Event Page/Website: _____

Date(s) & Time(s): _____

Location: _____

List of Activities Being Offered: _____

Type: Free Event Admission Collected E-Tickets-name source: _____

Organization's Overall Budget for Event/Project:\$ _____

Organization's Local Advertising Budget: \$ _____

Amount Requesting from Tourism Panel:\$ _____

What local advertisers do you plan on utilizing: _____

Estimated Tourism Impact (lodging, probable purchases, total visitors/participants expected): _____

Target Market for Attendance (age range, local participants, out of town participants): _____

Requested Advertising Media(s): Mailer/Postage Newspaper Radio Other (please list)

Additional Information (additional pages can be attached): _____

Note: This completed form is required for Panel consideration of a request. A filled out form is not a guarantee of funds. It is the responsibility of any organization receiving written notice of approval from the Tourism Panel, to submit all corresponding receipts and records to:

Morgan County Tourism, 231 Ensign St., Suite B102, Fort Morgan, CO 80701

