Wayne County Tourism Development Authority & Goldsboro Tourism Council

2020 Fall Tourism Resource Program

Program Purpose
The purpose of this program is to assist organizations in the development of tourism in Goldsboro and Wayne County and to supplement the efforts of the Wayne County Tourism Development Authority (WCTDA) and the Goldsboro Tourism Council (GTC) to increase visitation, expenditures, and overnight stays in the area.

Eligibility
To be eligible for assistance, the activity, event, or facility/business must be designed to attract new visitors from outside the local community and enhance the growth of the travel industry in Goldsboro and Wayne County. The assistance will be awarded based on the project’s ability to meet established guidelines, with priority for projects that demonstrate the ability to generate hotel/motel room nights.

Funding
This program will award two (2) $1,000 grants to selected applicants. Projects funded under this program must be for tourism related activities or endeavors. For example, eligible projects can be, but not limited to, festivals, events, attractions, advertising campaign for existing businesses that caters to local and nonlocal populations, etc. Awarded funds must be used for destination marketing, advertising, and promotion of the proposed event/attraction that targets audiences outside of Goldsboro-Wayne County. All projects approved for funding must be determined by the WCTDA and GTC as an attraction or event whose purpose is to serve and attract visitors to Goldsboro/Wayne County.

Priority will be given based on the project’s ability to generate hotel/motel room nights. Secondary priority will be given to the project’s ability to generate day visitation of out-of-county visitors.

Terms
Organizations may apply for assistance no later than 5pm on Monday, August 24th 2020. The project must occur before June 30, 2021. If the applications are not received by August 24, 2020 by 5pm, the application may not be considered for funding. The WCTDA and GTC will consider all applications and award assistance in its discretion.

Examples of ineligible expenses: lodging/travel, salaries, postage, administrative costs, telephone charges, office supplies, publications for sale, alcoholic beverages, and the purchasing of equipment.

Examples of eligible expenses: advertising, logo design, flyers/pamphlet productions and distribution, newsletters, public relations, promotional video production and content creation.

The awarded applicant will be expected to maintain itemized receipts and expense tracker showing a detailed breakdown of how the funding was spent. The WCTDA & GTC reserves the right to inspect, at any time, the grant recipient’s expense tracker to ensure compliance with program guidelines and
accuracy of financial reporting. If any of the $1,000 funds were not spent, the WCTDA and GTC have the right to request reimbursement of unspent balance. The unspent balance of the awarded funding must be returned to the Visit Goldsboro office within 60 days of the time the applicant submitted expense tracker of how the funding was spent.

Approval of the funding includes the use of the “Visit Goldsboro” logo, which is encouraged to be included on printed promotional and/or supplemental materials. The Visit Goldsboro office must aptly be recognized for the donation at the project site, invited to ground breakings and associated events, and mentioned in media coverage.

Within 30 days of completing the tourism related activity, the grant recipient needs to provide an accountability report (see attached) to the WCTDA & GTC. If not received, the recipient may not be eligible for funding in the future.

In the decision-making process, the WCTDA & GTC will consider such factors as the type and scope of the applying organization/agency, the effect and impact of proposed project on travel and tourism, the timetable in which the project will be completed, the dollar amount requested, the number of applications received, the projects ability and intent to attract visitors to Goldsboro on a continuing basis, and the overall merit of the project. A committee comprised of voting members of the WCTDA & GTC shall review all applications and recommend awards. The WCTDA & GTC shall vote and have authority in granting and disbursing funds. Applicants will be notified of their award status by September 1st 2020.

Covid-19 Disclaimer
The Covid-19 virus has impacted the ability for many events to take place safely and for projects to move forward. The WCTDA and GTC understands that the threat of the virus could still cause postponements or cancellations of events and other types of proposed projects. In the event of a postponement, the awarded applicant will be able to keep their funding to use for the rescheduled date. If the event or project is not an annual occurrence and is ultimately cancelled, the applicant will be responsible for notifying the GTC & WCTDA at its earliest convenience and will reimburse the awarded funds within 30 days of the decision to terminate the event or project.

If you received funding from the 2020 Spring Tourism Resource Program, and your event was postponed for a future date, you may use your already awarded funding for the rescheduled event or project. You may also still apply for more funding through this Fall Program, but your project may not be as high as a priority compared to new applicants who have not received prior funding.
2020 Fall Tourism Assistance Program Application

1. Organization Name: ____________________________________________

2. Application completed by: ______________________________________

3. Project Director (if different from above): __________________________

4. Address: ______________________________________________________

5. City/State/Zip: _________________________________________________

6. Telephone: __________________________ 7. Fax: ___________________

8. E-mail address: ________________________________________________

9. Describe your organization’s role to visitors in Goldsboro.
   _______________________________________________________________
   _______________________________________________________________
   _______________________________________________________________
   _______________________________________________________________
   _______________________________________________________________

10. Project/Event Name: ___________________________________________

11. Project Start/Event Date: ___________ 12. Project/Event End Date: ___________

13. Total Project Budget: __________________________________________
    A. Amount requested from GTC/TDA: _____________________________
B. Funds to be provided by Applicant: ________________________________


15. Does your organization/agency receive any tax funding?
   Yes ____________ If so, how much? $ ____________
   No ____________

16. If your organization/agency receives tax funding, what is the source of the funds?
   Local ________________
   State ________________
   Federal ________________

17. Does your organization/agency receive funding from a Foundation(s)?
   Yes ________________ If so, how much? $ ____________________________
      If so, which Foundation(s)? ________________________________
   No ________________

18. Is your organization/agency:  For Profit ____________ Non-Profit ____________

19. Narrative description of project to be funded. Attach a maximum of two-page description if needed.
   ______________________________________________________________________
   ______________________________________________________________________
   ______________________________________________________________________
   ______________________________________________________________________
   ______________________________________________________________________
   ______________________________________________________________________
   ______________________________________________________________________
   ______________________________________________________________________
   ______________________________________________________________________
   ______________________________________________________________________
   ______________________________________________________________________
   ______________________________________________________________________
20. Project justifications and economic benefit/impact to the visitor industry:


21. How will this project benefit your organization?

22. Anticipated attendance: ________________________________

24. Last year’s attendance: ________________________________

23. Anticipated room nights: ________________________________

25. Last year’s room nights: ________________________________

26. Any additional information that support the need for the project as an event or activity to enhance Goldsboro/Wayne County as a travel destination:


Signature: ___________________________ Date: ________________
(Project Director)

Signature: ___________________________ Date: ________________
(Authorized or Administrative Official)

Please return application by August 24, 2020 by email or mail to:
Visit Goldsboro
Attn Amber Herring, WCTDA/GTC Secretary
Tourism Assistance Program Accountability Report

Within 30 days of completing the tourism related activity, the grant recipient needs to provide an accountability report to the WCTDA & GTC. If not received, the recipient may not be eligible for funding in the future.

<table>
<thead>
<tr>
<th>Project Name</th>
<th>Dollar Amount Received</th>
<th>Amount Spent</th>
<th>Date Project Completed</th>
<th>Total Expenses of Project</th>
<th>Evaluation of economic impact to the visitor industry in Goldsboro</th>
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Date Project Completed: ____________________________

Today’s Date: ____________________________

Total Expenses of Project: ____________________________

Evaluation of economic impact to the visitor industry in Goldsboro: ____________________________

Evaluation of economic impact to the visitor industry in Goldsboro: ____________________________

Evaluation of economic impact to the visitor industry in Goldsboro: ____________________________

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Evaluation of economic impact to the visitor industry in Goldsboro: ____________________________

Overall evaluation of the project: ____________________________

Overall evaluation of the project: ____________________________

Overall evaluation of the project: ____________________________

Overall evaluation of the project: ____________________________

Overall evaluation of the project: ____________________________

Number of Tickets/Registrations sold: __________________

Number of attendees: __________________

Percentage of nonlocal attendees (attendees with non-Wayne County zip codes): __________________

If your event or attraction did not sell tickets or paid registrations, please explain how you arrive at your attendance estimate: ____________________________
Impact on the hotel/motel industry in Goldsboro-Wayne County

Total Room Nights Generated:_______

If comp’d room nights were negotiated, please indicate the following:

Paid Room Nights:_______________  Comp’d Room Nights:_______________

List Participating Hotels:
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

*Attach hotel documentation to this form.

*Attach receipts outlining how the project used the awarded amount

Please return report within 30 days of event/activity by email or mail to:
Visit Goldsboro
Attn Amber Herring, WCTDA/GTC Secretary
308 N. William St.
Goldsboro, NC 27530
aherring@goldsboronc.gov