



Santa Rosa County Tourist Development Office  
8543 Navarre Parkway  
Navarre, FL 32566

Local Event/Marketing Application

Any organization requesting funding will be required to complete this form

Applicant Organization Santa Rosa Art + Culture Foundation

Contact Person Jerry Cummings Title President

Organization Address 6815 Caroline St.

City Milton State FL Zip 32570 Phone (850) 626-4499 Jerry. Foundation

Email Address: gracf2014@gmail.com Web Address: WWW.GRACF.ORG

Cell ( ) Organization IRS Status 501(c)(3)

Name of Event or Project: 5th Annual

Has this project received grant funding from the SRC Tourist Development Council in the past? No

If yes, when and how much and what year? \_\_\_\_\_

If yes, what is the room history of the event? # of rooms \_\_\_\_\_ # of nights \_\_\_\_\_

**2016/2017 Event Request Details**

Location of Event or Project: Carpenter's Park to Bagdad (See Map)

Date(s) of Event or Project: Oct. 1, 2016 - Saturday 8am-5pm

Detailed Explanation of the Project: Bagdad to Milton Plein Air Paint Out

This event has drawn artistic painters to the diverse area. Painters register their canvas & sign in at 8:00am. Then off they go! They can set up & paint anywhere in the county as long as they report back by 2:00pm with their framed work that they painted. At 2:00pm work gets hung & judged, painters are served lunch & enjoy music. Next, a reception is held at 3:00pm with prizes and awards.

2014

2015  
2,050

2014  
860

Total Budget of Event: \$ 2780  
(A budget with anticipated revenue and expenses is required upon submittal of application)

Amount Requested: \$ 1500 - 2000

Intended use of Funds: Broshures, Network Marketing, Site Fee, Media Adver <sup>News</sup>

Match Provide by Organization

In-kind description: \_\_\_\_\_

Value of in-kind: \$ \_\_\_\_\_ Match dollars provided by your organization: \$ \_\_\_\_\_

In- Kind Definition – Make up of something other than money; (of payment) given in the form of goods or services and not money.

Projected Attendance: 500-800 Projected Number of Out of Town Visitors: we are trying to target this area  
walkers through out our Historic & scenic river area.

What are the goals and objectives for this event for which you are applying for:

Draw in artist from neighboring States with more advertising  
Which will give artists an opportunity to create art in  
a part of North West Florida (waterfront, Historic Milton & Bagdad +  
farms). Provide artists with time to paint in a structured, judges  
Paint Out.

Describe how the effectiveness of this event will be measured:

The artist are happy & they return every year.  
They bring in more of their friends. This will be our  
5th Annual Paint Out. It has grown every year.

How will the event/project benefit tourism in Santa Rosa County?

The event will bring more artist to the area, their beautiful  
depictions of the area will draw tourist from a 60-90  
mile radius area & vacationers to our Canoe Capital & our  
lovely Historic District along Blackwater River (Beaches to woodland

What are the demographics of your targeted attendees (i.e. families, professionals, youth, etc. plus other demographic information as available):

We pull from local and boarding States. People love art  
& art shows. We attract all ages, young, old, students,  
and families.

Anticipated number of vendors: 40-50

Will you survey the participants to capture data: yes (on site paint out surveys at  
each location.

If no, how do you intended to collect data for reporting purpose: \_\_\_\_\_

**Estimated Bed Tax Calculation**

Estimated Number of Visitor Rooms: \_\_\_\_\_  
X

Estimated number of nights: \_\_\_\_\_  
X

Estimated Room Rate per Night\*: \_\_\_\_\_

= \_\_\_\_\_ X .05 = \$ \_\_\_\_\_  
Estimated Total Bed Tax Generated

- \*Use the following estimated rental rates to calculate bed tax estimates
- Spring (March 1-Memorial Day): \$151 per night
  - Summer (Memorial Day – Labor Day): \$188 per night
  - Fall (Aug. 31 – Nov. 1): \$118 per night
  - Winter (Nov. 1 – Mar. 1): \$95 per night

**Estimated Sales Tax Calculation**

Estimated Number of Visitors: \_\_\_\_\_  
X

Average Spending per out-of town visitor per day including transportation: \$110  
X

Estimated Number of Days In County: \_\_\_\_\_

= \_\_\_\_\_ X .065 = \$ \_\_\_\_\_  
Estimated Total Sales Tax Generated

**Total Potential Tax Impact**

Total Estimated Bed Tax Generated (from calculation above): \$ \_\_\_\_\_

Total Estimated Sales Tax Generated (from calculation above): \$ \_\_\_\_\_

Total Estimated Tax: \$ \_\_\_\_\_

Describe how financial resources will be monitored

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

Have you applied for an event permit? NO Are any licenses required? NO

*will secure*

If so, list the required licenses and permits and attach copies to this application

Will you purchase event insurance? Yes / No, Carrier Locklin Ins.

Liability/Medical Insurance? Yes / No, Carrier \_\_\_\_\_

Please list the Event's Lodging and non-Lodging partners: *(will contact)*

Lodging Partners

Non-Lodging Partners

Red Roof Inn

Holiday Inn

KOA

\_\_\_\_\_

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Are lodging partners offering a special rate for this Event? \_\_\_Yes \_\_\_No *N/A*

Will lodging partners provide room night verification after this Event? \_\_\_Yes \_\_\_No *N/A*

How will information about room nights actually booked for this Event be obtained (e.g. lodging partner reports, registration roster, visitor survey, ticket sales)?

*Visitor survey*

If this is **NOT** a new event, what efforts are being made to grow the event to increase the number of overnight visitors from the previous year?

*Social Media, Advertising, Web Site (SRACE.ORG)  
Radio, newspaper.*

Please use the space below to add any additional event information:

*This year we hope to <sup>have</sup> Paint Out flags near where the artist are set up to paint for the day. We are increasing our marketing through Social Media & word of mouth returning artist. This year we will be working with Car Clubs to place an antique car near a location throughout the riverwalk area to draw additional Tourist & locals. to the paint out mapped area. A walking map will be provided in our media Blast. This is going to be an exciting day for visitors & artist. What a perfect month of October it will be.*

## Estimated Budget

### Projected Income

	CASH	IN-KIND	
Entry Fees (participants)	1500		
Admissions (spectators)			
Sales (merchandise, etc.)			
Sponsorships	1000		
Other			
Local Event Marketing Funding			<b>TOTAL INCOME</b>
<b>TOTAL</b>	<b>\$ 2500</b>	<b>\$</b>	<b>\$ 2500</b>

### Projected Expenses

	CASH	IN-KIND	
Contracted officials			
Operations	150		
Rentals/Equipment			
Food and Beverage	275		
Merchandise for Sale			
Souvenirs/Giveaways			
Print Marketing	800		
Online Marketing	125		
Television Marketing			
Radio Marketing			
Direct Mail Marketing			
Direct Sales Marketing			
Florida's Playground-Branded Promo Items/Prizes			
Site Fees	150		
Sanction Fees			
Concert/Performance Fees	100		
Other <i>PRIZES/AWARDS</i>	1000		<b>TOTAL EXPENSES</b>
<b>TOTAL</b>	<b>\$ 2595</b>	<b>\$</b>	<b>\$ 2595</b>

## CERTIFICATION AND COMPLIANCE STATEMENT

**APPLICANT:**

I hereby certify that the information contained in this application is true and correct to the best of my knowledge and that I have read the policies and requirements of the Santa Rosa County TDC grants program and will abide by all legal, financial and reporting requirements as a condition of receiving grant funds from the Santa Rosa County TDC. Signatures must be original in blue ink.

Name: Jerry C. Cummings

Organization: Santa Rosa Arts & Culture Foundation Inc

Jerry C. Cummings  
Signature

4/27/2016  
Date

Please return the original plus (4) four copies of the Application and the Certification & Compliance Page by **5 p.m. Tuesday, May 31, 2016** to:

Santa Rosa County Tourist Development Office  
ATTN: Grants Program  
8543 Navarre Parkway  
Navarre, FL 32566

### Application Check List

- Completed application (pages 4-9)
- Signed certification and compliance form (page 10)
- Copy of event license (if any)
- Copy of event permit (if any)
- Copy of event insurance (if any)
- Copy of liability insurance
- Anticipated budget, including detailed expenses and revenue
- Original and four copies of your complete application package (all items listed above)