

Decatur County Convention Visitors Bureau
Application for Grant Funds

Name of Event: _____

Date(s): _____ Time: _____

Location: _____

Organization making request: _____

Contact Person: _____

Address _____ Phone _____

Amount Requested _____ Estimated Attendance _____

Briefly describe event: _____

How has this event been funded in the past _____

Is there a charge for this event? _____

If yes, what are the proceeds used for? _____

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After Report:

Estimate of how many Oberlin participants _____

Estimate of how many out of town participants _____

Did this event generate dollars spent:

Restaurants _____ Motels _____ Gas _____ Sporting

Goods _____ Other _____

Explain: _____

Please submit you printed advertising and news stories:

Oberlin CVB
507 West Elm
Oberlin, KS 67749
785-475-4603

