



## City of Kingman Convention & Tourism Grant Request Guidelines

Please return this form to City of Kingman, P.O. Box 168, 324 N Main, Kingman KS 67068  
[graffman@cityofkingman.com](mailto:graffman@cityofkingman.com)

Mission Statement: Assisting programs that will inspire people to visit, stay, dine, shop, and play in Kingman.

### *Program Guidelines:*

1. *Purpose:* The purpose of the grant program is to provide funds for marketing and other qualified expenses directed to increase the number of overnight visitors to Kingman from outside the area. Eligible events must also support and enhance tourism and a positive image of the City of Kingman as a destination.
2. *Fund Disbursement:* Funds will not be disbursed until the event has concluded and a Post Event Evaluation is submitted.
3. *Location:* The event or project must be physically held/located in the City of Kingman, Kansas.
4. *Funding Cycle:* Grants will be distributed on a quarterly basis. The grants applications will be reviewed in March, June, September, and December. Applications must be received by the last day of the month prior to the desired quarterly distribution month. Initial grant awards are tentative and the final determination will be based upon the program or event being evaluated after its completion.
5. *Promotional Requirements:* All public notices, printed promotional materials, social media, and event site publicity must acknowledge the support of the City of Kingman Convention & Tourism Board. Wording similar to the following would be acceptable: "This project is made possible in part by the financial support from the City of Kingman, Kansas, Convention & Tourism Board." These recognitions must include use of the City's logo, which is available upon request. Copies/proof of the event's use of the acknowledgment and City logo will be required with the Post Event Evaluation.
6. *Budget:* Each application must include a proposed budget that includes detailed expenses and revenues.
7. *Post Event Evaluation:* A mandatory Post Event Evaluation is required and due within three (3) weeks of project completion for funds to be dispersed. These evaluations should be fully completed with supporting materials to be accepted for fund disbursement. The C&T Board will review the event based upon the evaluation and changes could be made in the ultimate grant provided if the organizers cannot substantiate the information included in the original application for funding. This could include reductions or denials of grants.
8. *Use of Funds:* Grant funds must be used for the project for which it was requested. The Convention & Tourism Board must be notified in writing if the applicant does not plan to use their approved funds.
9. *Liability:* The recipient is responsible for any and all liability issues evolving from the activities.
10. *Project Completion:* Projects must be completed within twelve months.
11. *Ineligible Expenses:* The following items are NOT eligible for funding: capital expenditures, general operating or administrative expenses, interest on loans, the reduction of deficits or loans, and prizes of any type.



**KINGMAN CONVENTION & TOURISM COMMITTEE FUND REQUEST**  
(PLEASE TYPE OR PRINT LEGIBLY)

Return Forms to: City of Kingman, Convention & Tourism  
P.O. Box 168, 324 North Main Street  
Kingman, KS 67068  
graffman@cityofkingman.com

**APPLICATIONS WILL ONLY BE CONSIDERED ON A QUARTERLY BASIS: MARCH, JUNE, SEPTEMBER, AND DECEMBER. APPLICATIONS SHOULD BE SUBMITTED BY THE LAST DAY OF THE MONTH PRIOR TO THE DESIRED QUARTERLY REVIEW.**

\*\*Amount Requested: \_\_\_\_\_

Requesting Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address of Contact: \_\_\_\_\_

Make Check Payable to: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Contact Telephone Number: \_\_\_\_\_

**\*\*PLEASE UNDERSTAND THERE CAN BE NO GUARANTEE OF FUNDING OR WHEN APPROVED REQUESTS CAN BE FULFILLED. THE CITY MUST FOLLOW CASH BASIS BUDGETING REQUIREMENTS.**

C&T Grant funds WILL NOT BE DISBURSED until AFTER the event AND the Post Event Evaluation is completed, submitted, and approved. All grants are tentative until the final evaluation is completed by the C&T Board. Initial grants amounts could be reduced or denied if the event cannot verify the information provided in its application.

Events selected for funding must promote the support from the C&T Board by using language such as the following in promotional materials: "This project is made possible in part by the financial support from the City of Kingman, Kansas, Convention & Tourism Board." This promotional language must also include the logo of the City of Kingman.

Funding will only be determined at quarterly intervals: March, June, September, and December. Applications should be submitted prior to the last day of the month before the quarterly distribution sought.

*Application responses should be complete and informative so the Committee can adequately review and evaluate the funding request. Applications that are incomplete or lack sufficient detail will be denied. Please refer to Grant Request Guidelines that is attached when completing this application.*

1. *Event Details:*

- a. Name of event: \_\_\_\_\_
- b. Venue of event: \_\_\_\_\_
- c. Date(s) of event: \_\_\_\_\_
- d. Anticipated event attendance: \_\_\_\_\_
- e. Using estimated attendance, anticipated percentage of out-of-town guests: \_\_\_\_\_ %
- f. Anticipated overnight motel/B&B rooms used: \_\_\_\_\_
- g. Number of years event has been in Kingman previously: \_\_\_\_\_
- h. Has this event been given C&T funds previously: \_\_\_\_\_
- i. Is the event open to the public: \_\_\_\_\_

2. Please select the quarterly meeting at which you want this application considered (circle one):

March

June

September

December

This application must be received by the last day of the month prior to the month circled.

3. *Marketing of Event:*

- a. What methods of marketing will be used to promote event (be specific): \_\_\_\_\_  
\_\_\_\_\_
- b. Where will marketing be targeted (be specific): \_\_\_\_\_  
\_\_\_\_\_
- c. How will event promote the City of Kingman through its marketing: \_\_\_\_\_  
\_\_\_\_\_
- d. What local businesses/vendors will the event work with directly: \_\_\_\_\_  
\_\_\_\_\_

4. Describe how this event will benefit the City of Kingman. Please be specific.

5. Who will be responsible and accountable for any funds received from this request?

6. How is the program a particular benefit to tourism and convention promotion in Kingman?

7. Are additional funds available to this project from other sources? Are there matching funds available? Please describe.
  
8. How will this event's organizers evaluate and determine the impact this event has on Kingman, its businesses, and its motel/B&B use?
  
9. What alternative plans do you have in case of postponement due to inclement weather or scheduling conflicts?
  
10. If funding is granted, the C&T Board will require that a Post Event Evaluation be completed within three (3) weeks after the event is concluded before funds are disbursed. The C&T Board will review the event based upon the evaluation and changes could be made in the ultimate grant provided if the organizers cannot substantiate the information included in the original application for funding. Who will be responsible for completing this process?
  
11. Please attach to this form the following information as applicable:
  - a. A full budget for the project detailing how the funds requested will be used and the relationship to any other funds received.
  - b. Any drawings, sketches and plans that might apply.
  - c. Mock-ups or sketches for projects involving printed matter.
  - d. Timelines and schedules for projects involving programs or advertising campaigns.
  - e. Promotional materials that will include use of the City's logo and sponsorship.

Event Certifications (Must be signed by TWO officials from the organization responsible):

- We certify that to the best of our knowledge, the information provided in this application is accurate, complete, and endorsed by the organization we represent.
- We agree to acknowledge the financial support from the City of Kingman and to use its logo in our promotional and marketing materials.
- We agree to complete the Post Event Evaluation fully in order to have our funding disbursed and that our ultimate grant awarded could differ from the initial amount should we be unable to verify or document the information from our application in the evaluation.

\_\_\_\_\_  
Authorized Signer for Organization

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorized Signer for Organization

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

<b>FOR CITY USE:</b>	Date Received: _____	Date Approved: _____
Approved: _____	Denied: _____	Amount Approved: _____
C&T Board Chairman Signature: _____		





# **Kingman Convention & Tourism Grant Evaluation Form**

Review Criteria	Points Possible	Points Earned	Comments
<b>Number of Anticipated Participants</b>			
1 to 25	5		
26 to 50	10		
51 to 100	15		
101 and above	20		
<b>Percentage of Out-of-Town Guests</b>			
Less than 30%	5		
More than 30%	10		
<b>Motel/B&amp;B Rooms Used for Event</b>			
None	-30		
1 to 5	5		
6 to 10	10		
11 and above	10		
More and One Night	5		
<b>Number of Local Businesses/Vendors Used</b>			
None	-30		
1 to 4	5		
5 to 10	10		
11 and above	15		
<b>Marketing</b>			
None	-30		
Local Newspaper Advertising	5		
Out of Town Newspaper Advertising	10		
Radio Advertising	15		
Television Advertising	20		
Social Media Advertising	10		
C&T Promotion Language and Logo Used	10		
C&T Promotion Language and Logo Not Used	-30		
Signage at Event	5		
<b>Event Supports and Enhances Tourism</b>	10		
<b>Event Promotes a Positive Image for Kingman</b>	10		
<b>Application Completed Fully with Support</b>	10		
Budget Included	5		
<b>Economic Benefits for Kingman</b>	10		
<b>Event Previously Held in Kingman</b>	5		
<b>Total Score for Event</b>			
0 to 39 points	No Funding		
40 to 59 points	Up to 25% Funding		
60 to 79 points	Up to 50% Funding		
80 to 99 points	Up to 75% Funding		
100 points and above	Up to 100% Funding		

Scoring will be re-done after Post Event Evaluation is submitted, so final amount approved could differ from original grant.



## City of Kingman Convention & Tourism Post Event Evaluation

Please return this form to City of Kingman, P.O. Box 168, 324 N Main, Kingman KS 67068

[graffinan@cityofkingman.com](mailto:graffinan@cityofkingman.com)

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

Date(s) of Event: \_\_\_\_\_

Organizer of Event: \_\_\_\_\_

Please complete this evaluation fully and completely. Be sure to attach pages or any necessary documentation for support.

NOTE: The C&T Board will review your entire project upon receipt of this evaluation and determine what the final grant distribution will be. The Board will compare the event's application for funding with this evaluation to ensure the information is consistent and documented. Incomplete documentation or information that is not supported will be causes for the grant award to be reduced or denied.

1. *Event Details:*

How many attended event, excluding participants: \_\_\_\_\_

How was attendance determined: \_\_\_\_\_

How many participants in event: \_\_\_\_\_

Percentage of attendance that was out-of-town guests: \_\_\_\_\_ %

Number of motel/B&B rooms used as result of event: \_\_\_\_\_

How was the number of motel/B&B rooms determined: \_\_\_\_\_

2. *Marketing of Event (please attach marketing material used):*

What method(s) of marketing were used to promote event: \_\_\_\_\_

\_\_\_\_\_

In what locations was the marketing targeted for this event: \_\_\_\_\_

\_\_\_\_\_

How did the event promote the City of Kingman through its marketing: \_\_\_\_\_

\_\_\_\_\_

What local businesses and vendors did the event utilize directly: \_\_\_\_\_

\_\_\_\_\_

Did the event use the City of Kingman logo and include recognition of C&T funding. How?

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3. *How did the event benefit the image of the City of Kingman:* \_\_\_\_\_

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4. *How was this event a particular benefit to tourism and convention promotion in Kingman:*

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5. *Please attach a detailed final budget that shows income and expenses for the event.*

6. *What worked the best about having this event in Kingman?* \_\_\_\_\_

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7. *What would be done differently for this event in the future?* \_\_\_\_\_

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8. *Please evaluate the facilities used for the event for strengths and weaknesses:* \_\_\_\_\_

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9. *Will the event return to Kingman in the future? Why/Why Not:* \_\_\_\_\_

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Event Certifications (Must be signed by TWO officials from the organization responsible):

- We certify that to the best of our knowledge, the information provided in this application is accurate, complete, and endorsed by the organization we represent.
- We understand this Post Event Evaluation is necessary to have our funding disbursed and that our ultimate grant awarded could differ from the initial amount should we be unable to verify or document the information from our application in this evaluation.

\_\_\_\_\_  
Authorized Signer for Organization

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorized Signer for Organization

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date