

Hillsborough Tourism Development Authority FY25 Special Project/ Partnership Funding Request



Organization Information		
Organization Name:		
Contract Contact Person and Title:		
Contact Person Email:	Contact Person Phone:	
Organization Street Address:		
City:	State:	ZIP Code:
Organization's Annual Operating Budget: \$		
Amount of TDA funding being requested: \$		
General Information		
Outline/Overview of the requested proposal:		
<p>Please explain how the proposal will promote tourism in Hillsborough:</p>		

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Tourism Impact

Please estimate the number of residents this proposal will serve:

Please estimate the number of tourists this proposal will bring to town:

If this proposal has been held or done before, please describe how the actual number of residents and tourists were counted (ie. registration/pre-registration, ticket sales either prior to the event or at the event gates, via turn style data, counters from volunteers, wristband tracking, counts at the site):

Please describe how you plan to partner with local hotel/motels on this proposal:

Please describe how you plan to partner with local business/non-profits/governments on this proposal:

Please [calculate the overall economic impact](#) of this proposal (if applicable):

Please outline how you plan to make this proposal financially sustainable overtime:

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Check this box acknowledging that all funds must be used for the program/event as outlined in the budget and that the tourism logo and tourism partnership should be acknowledged and displayed on all promotional materials (flyers, tshirts, banners, social media posts) where other sponsors are listed or promoted.

Date

Signature & Printed Name

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