



ADVERTISING ASSISTANCE GRANT APPLICATION 2015 - 2016

APPLICATION DEADLINE

Applications must be received by 5:00 pm on Friday, June 12, 2015. **Applications and marketing timeline must be emailed to dsilver@intothearts.org. Late applications will not be accepted.**

APPLICATION REQUIREMENTS

Follow all instructions on application. Incomplete applications will not be considered for funding. If you are copying and pasting information into this document use 11 point font. All applications should be emailed to Dara Silver, Director of Member Services and Grants. Please contact her for assistance if needed at (336) 747-1426 or dsilver@intothearts.org.

APPLICANT INFORMATION

Complete all information below. If your contact information changes at any point during the grant process or period it is your responsibility to contact the Director of Member Services and Grants.

Name of Organization: _____

Name of the Director or Manager of Organization: _____

Grant Contact: _____

Contact Title: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone: (Day) _____ (Evening) _____

E-mail Address: _____ Website: _____

ORGANIZATIONAL PROFILE

Provide a brief description of your organization, including its mission, scope of programs and services, and number of people served annually. (500 words max at 11 point font)

MARKETING PLAN

Below briefly outline your marketing plan for the program period, include promotional objectives and how the advertising program would help accomplish your objectives of your marketing plan. (500 words max at 11 point font)

MARKETING TIMELINE

Create a separate marketing timeline for each of the advertising partners. Timeline should cover advertising that takes place between July 1, 2015 and June 30, 2016. Timeline should include date, type of advertising, price per advertising, and a total for all advertising per partner.

BUDGET

Indicate the total dollars allocated for each of the media partners. If you are not budgeting any funds for one of the media partners leave the column blank. Please refer to the Advertising Assistance Grant Guidelines, ad kits and partner contacts for the discounted rates.

Advertising Partner	Budgeted Advertising Allocations for each Partner (should reflect discounted rates)
90.5 WSNC	
WS Journal	
The Chronicle	
Forsyth Woman/Forsyth Family	
EverWondr Network	
WXLV ABC45/WMYV my48	
Camel City Dispatch	
Total Budget Advertising	

CERTIFICATION

I certify that the information contained in this application and all supporting material is true and correct to the best of my knowledge. I certify that I am committed to the completion of the proposed project in compliance with legal requirements and granting procedures.

- I will email this application to the Director of Member Services and Grants at the following email address: dsilver@intothearts.org
- I will email all marketing timelines to the Director of Member Services at the following email address: dsilver@intothearts.org
- If granted, I will adhere to the grantee responsibilities, outlined in the Advertising Assistance Guidelines.

Date

Applicant Signature