

**POST EVENT FORM**  
City of Elliot Lake Event Support Program

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

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

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

<b>Final</b> Amount Requested:    \$
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Instructions:

Fill out the information in the post event form. Wherever possible, provide confirmation of estimates detailed in your original application.

**Attach detailed event financials.**

Submit post event form and direct questions to:

Todd Stencil, General Manager  
Elliot Lake & District Chamber of Commerce  
P.O. Box 81  
Elliot Lake, ON  
P5A 2J6  
Tel: (705) 848-3974  
E-Mail: elchamber@onlink.net

Forms can be dropped off at:  
Chamber Office (Lester B. Pearson Civic Centre)

***Note: Post Event Form must be submitted within 30 days of event.***

For Internal Use Only	
Date Received:	
Review Date:	
Final Payment Approved:	

Event Details

**Final event financials must be attached**

Summary of Event:

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Was the event a success? YES NO  
Will this event occur in Elliot Lake again? YES NO MAYBE

Explain: \_\_\_\_\_  
\_\_\_\_\_

Event Impact

Total Participants: \_\_\_\_\_

Non-Resident Participants: \_\_\_\_\_ Resident Participants: \_\_\_\_\_

Total Room Nights:      Algo Inn: \_\_\_\_\_  
                                    FireSide Inn: \_\_\_\_\_  
                                    Denison House: \_\_\_\_\_  
                                    Dunlop Lodge: \_\_\_\_\_  
                                    Other (list): \_\_\_\_\_  
                                    \_\_\_\_\_

List Marketing and Outreach For Event (Include copies of each)

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List any other details of your event or the benefits of the City's financial support.  
Use this area to confirm estimates listed in your original application.

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