

CANALSIDE - VISITOR EXPERIENCE 2013 Assisted Programming Application

Date Submitted:					
Contact Infor	mation:				
Name:		Title:			
Organization:					
Address:					
City:		State:			
Zip Code:		Phone:			
E-mail:					
ls you	r Organization a registered 501(c)(3)?	☐ Yes	No	Pending	
		* If Yes o	r Pending, please att	ach IRS Letter of Determin	ation.

Programming Assistance being applied for:

○ General (complete pages 1 - 5 only)

- Story of Buffalo (complete page 1 6)
- Special (complete pages 1 5 AND page 7)

*Please refer to the Request for Proposals for a description of the programming types and funding available.

Title of Program:	
General Description:	

Location: (Refer to Map)	Green Slope Aud Block
 Anywhere, our program is flexible Everywhere, our program is mobile by its nature We request the following land area(s): Naval & Serviceman's Park* Green Slope Ruins Whipple Truss Bridge 	Historic Ruins Liberty Hound Naval Museum Whipple Truss Bridge
 Great Lawn Boardwalk Cobblestone Streets (Lloyd, Prime, Hanover and Pelei Pierce Lawn Dart Lawn Dunbar Lawn The Beach Boardwalk Extension We request to be on the water (Commercial Slip, Buffalor In addition to the program occurring on the water, we are requesting dock space at: Commercial Slip (historic or replica vessels only) Floating Docks Number of vessels 	Buffalo Sunset Chairs
Provide specific details regarding the location requested and how you plan to use the space:	

* Use of the Naval & Serviceman's Park facilities will require a signed agreement between them and your organization at the time of submitting this application. Any costs associated with the use of these facilities are the responsibility of the organization and will not be covered by Erie Canal Harbor Development Corporation.

Frequency:

ECHDC encourages Applicants to plan events during the following time blocks: Weekday • *lunchtime* (11:00am - 2:00pm) • *afternoon* (2:00pm - 5:00pm) • *evening* (6:00pm - 8:00pm) Plus Weekend • *mornings* (begin 9:00am) • *late evenings* (end 10:00pm).

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O Single Day	Preferred Date/Time		Backup Date/Time	
O Multiple Dates	List Dates/Times			
O Weekend	Preferred Date/Time		Backup Date/Time	
Date of Programming is	critical because:	Part of a Regional Even	nt held on the request	ed date
		Significant date for the	e Organization (Annive	rsary, Birthday, etc.)
		The date is the reason	for the event (Memor	ial Day, 4th of July, etc.)
		Date/Time are flexible		
Provide any additional information on requested dates and/or times:	ed			

Site Amenities Required:

Riser or Stage	
Sound	
Lighting	
Small Tent	
Large Tent	
Tables	
Chairs	
Additional Bathrooms	
Additional Security	
Site Cleanup	
Temporary Storage	
	Riser or Stage Sound Lighting Small Tent Large Tent Tables Chairs Additional Bathrooms Additional Security Site Cleanup

Provide description for each needed Amenity

The following amenities are available or may be coordinated at Canalside in 2013:

<u>Riser</u>- 20 ft. x 24 ft. semi-permanent - no charge.

<u>Stage</u> - Stage may be coordinated with preferred vendor, charges will apply <u>Sound</u> - Small P/A system, no charge.

Large sound equipment may be coordinated with preferred vendor, charges will apply Lighting - May be coordinated with preferred vendor, charges will apply

<u>Small Tent</u> - Up to 6 small tents (10 ft. x 15 ft.) - no charge.

Large Tent - may be coordinated with preferred vendor, charges will apply

Tables - may be coordinated with preferred vendor, charges will apply

<u>Chairs</u> - Adirondack chairs are available at no charge.

Other types may be coordinated with preferred vendor, charges will apply <u>Bathrooms</u> - 2 Mens and 2 Womens washrooms are available, no charge <u>Additional Bathrooms</u> - May be coordinated with preferred vendor, charges will apply <u>Regular Security</u> - Security staff maintains the site at no charge.

<u>Additional</u> <u>security</u> - May be coordinated with preferred vendor, charges will apply

Site Cleanup - May be coordinated with Buffalo Place Operations personnel, charges will apply

Budget:

Program Budget

Check Box if applicable to ECHDC Funding Request

Qualified Staff (Employees, Actors, Volunteers, etc.) Program Development, Training and/or Preparation Special equipment, tools and/or consumable supplies Marketing, advertising and/or promotional materials Site Amenities:

Stage			
Sound		[[
Lighting			
Large Tent			
Tables			
Chairs			
Additional Bathrooms			
Additional Security			
Site Cleanup			
		[[
		[[
		[[
		[[
		[[
	TOTAL PROGRAM BUDGET:		
	ECHDC Funding Request:		

ECHDC Sub-Total <= 50% of TOTAL PROGRAM BUDGET

ECHDC Sub-Total <= Programming Fund Maximum

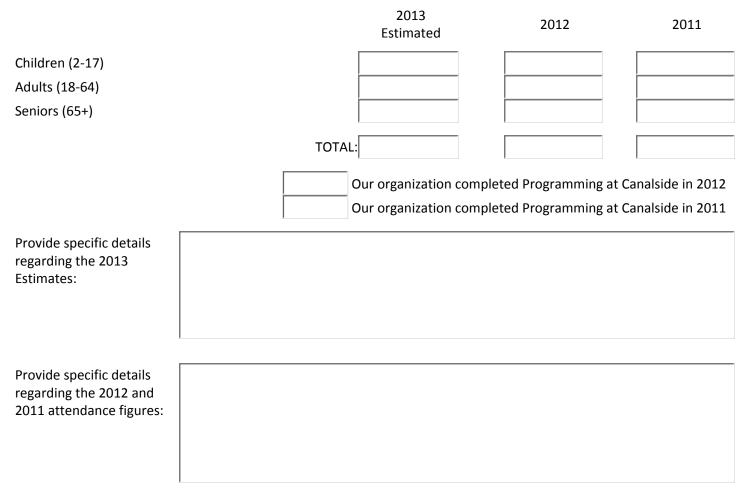
Refer to RFP for Programming Fund Maximum

We plans to offset our Organization's costs by:

Sponsorships
Selling Concessions (No Alcohol)**
Selling Concessions (Including Alcohol)**
Vendor Fees
Gate/Entrance Fees or Ticket Sales***

- ** Organizations are made aware that concessions may be prohibited or restricted at certain times at the discretion of ECHDC.
- *** ECHDC <u>strongly</u> discourages gate/entrance fees or ticket sales as these programs are receiving public funds. Organizations are made aware that requiring gate/entrance fees or ticket sales may be basis for rejecting this Application.

Attendance:



Insurance Requirements:

Refer to Section IV.D.4 and Exhibit A of the RFP for Insurance Requirements.

These insurance requirements are considered minimums and may be adjusted higher based on the submitted proposal.

Our organization has reviewed the minimum insurance requirements in the RFP and we can provide the same.

General Programming Application Submitted By:

Name:	Title:
Signature:	

General Programming Application is complete. Stop Here. Story of Buffalo Programming Application continue to Page 6. For Special Programming Application complete Page 7. Title of Program:

Describe how your programming helps tell the Story of Buffalo:

Story of Buffalo Programming Application Submitted By:

Name:	Title:	
Signature:		

Title of Program:	
Describe the unique and special nature of your programming:	
Describe why your programming should occur at Canalside as opposed to another area of the City:	
Will your Special Programming attract Regional, National or International attention? Describe.	

Only Special Programming Applicants complete this page

Special Programming Application Submitted By:

Name:

Signature:

Title:

Special Programming is complete. Stop Here.