



Date Received – Date Stamp

02/22/22

### Events Where City Costs are Funded

The City Commission shall on a case by case basis approve special events for which some or all the costs of City fees and or resources are subsidized through a specially funded account. For funding consideration, the event must be held in the City of North Port and meet the guidelines as outlined in City Special Events Assistance Program Guidelines and the Unified Land Development Code Chapter 53, Section 53-265 Special Events.

### Instructions

The applicant shall submit to the Planning and Zoning Division, a completed Special Events Assistance Program application. The application will be presented to the City Commission at the next available regularly scheduled meeting to consider the applicant's request for funding and either approve or deny the request. The funding amount if granted, will be applied directly to City fees and or resources associated with the special event. If the amount of funding is insufficient to cover the cost of City fees and or resources, it shall be the responsibility of the applicant to pay the difference. Although a special event permit is not required at the time of application for assistance, an issued special events permit is required for the event to be held.

### General Information

Applicant: Kiwanis

Is the applicant: Individual  Corporation  501c3  Other:  \_\_\_\_\_

Contact person: Cindy HEMBERGER

Address: 8907 TROPIC AIRE Blvd

City/State/Zip: NORTH PORT, FL 34291

Telephone: 941-223-4336 Home: emjm67@yahoo.com

Cell: 941-223-4330 Email: SMALLWORLDKENWOOD@aol.com

Preferred means of contact: Call <sup>cell phone</sup> or email  
emjm67@yahoo.com

**Event Information**

Event Name: Victim's Rights Vigil

Is the event open to the public?  Yes  No Admission charged?  Yes  No

**(If the event is not open to the public and/or admission charged, the event does not qualify for the program)**

Location Address: 4999 Pan American Blvd

Date(s) of Event: Apr. 29, 2022 Hours: 5-8:30 Expected Attendance: 150

**Start & End**

Amount of Request: \$ 70.00 Financial Need:  Yes  No

Will this event occur without financial assistance?  Yes  No

Event is (check one):  One-time event  Annual event

If annual event, how many years has your organization been holding this event? None/first time

Prior funding from City:  Yes  No If yes, amount received: \$ \_\_\_\_\_

Description of Event: Vigil to promote Victim's Rights Week Apr. 24-30 to help crime survivors find their justice and help with rights, access and equality for all victims

**Affidavit of Applicant:**

I certify that the information contained in this application is true and correct to the best of my knowledge, that I have read and understand that if funding is approved, I agree to abide by the guidelines and procedures governing this program.

Cindy Hemberger  
Signed by Applicant

2/22/22  
Date

CINDY HEMBERGER  
Please Print Name