

## APPLICATION SPECIAL EVENTS ASSISTANCE PROGRAM



3/20/2023

## **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 Parks and Recreation Department, 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:	
Is the applicant: Individual $\ \square$ Corporation	n $\square$ 501c3 $\square$ Other: $oxtimes$
Contact person:	
Address:	
City/State/Zip: North Port	
Telephone:	Home:
Cell: En	Email:

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Preferred means of contact:		
<b>Event Information</b>		
Event Name:		
Is the event open to the public?	Ⅺ Yes □ No Adm	nission charged? □ Yes  凶 No
(If the event is not open to the p	oublic and/or admissi	ion charged, the event does not qualify for the
program)		
Location Address:		
Date(s) of Event:	Hours:	Expected Attendance:
	Start 8	& End
Amount of Request: \$	Financial	Need: ☒ Yes ☐ No
Will this event occur without fina	ancial assistance? 🛭 Y	∕es □ No
Event is (check one): ☐ One-tim	e event 🛛 Annual e	vent
If annual event, how many years	has your organization	n been holding this event?
Prior funding from City: 🛚 Yes	☐ No If yes, am	nount received: \$
Description of Event:		
Affidavit of Applicant:		
have read and understand that if furthis program.	nding is approved, I agr	n is true and correct to the best of my knowledge, tha ree to abide by the guidelines and procedures governing
Whitney Zora Signed by Applicant	Stetler	
Signed by Applicant		Date
Please Print Name		

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