

## APPLICATION SPECIAL EVENTS ASSISTANCE PROGRAM



Date Received - Date Stamp

12/08/22

## **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 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: FAMILY PROMISE OF SOUTH SHRASOFA COUNTY
Is the applicant: Individual $\square$ Corporation $\square$ 501c3 $\bowtie$ Other: $\square$
Contact person: SHANNON MORDOUIST
Address: 850 COCKRILL ST.
City/State/Zip: VENICE, FL 34285,
Telephone: 941.497-9881 202 Home:
Cell: 502-558-2977 Email: SMN@ family bromsessc. org

Preferred means of contact: SHAIL
Event Information
Event Name: 2ND ANNUAL KENDUCKY DERBY
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: 6201 W PIICE BUD HORTH FORT FL
Date(s) of Event: 05/06/23 Hours: 8-10 AM Expected Attendance: ZOO
Start & End
Amount of Request: \$ 500 Financial Need: XYes □ No
Will this event occur without financial assistance? ✓ Yes □ No
Event is (check one):   One-time event
If annual event, how many years has your organization been holding this event? THS IS DUD YR
Prior funding from City: Yes  No If yes, amount received: \$
Description of Event: <u>BUCK RACE FUNDRACER</u> . <u>SONOLS DONATE</u>
I FOR A DUCK IN THE PACE TO WIN A PRIZE.
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.  Signed by Applicant  Date
Please Print Name

Page 2 of 2

Rev 6-26-18