

OCT 0 9 2024

## SPECIAL EVENTS ASSISTANCE PROGRAM APPLICATION

### **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 outlined in City Special Events Assistance Program Guidelines and the Unified Land Development Code Chapter 3, Section 3.10.1. Special Events.

#### **INSTRUCTIONS**

The applicant shall submit to the Parks & 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; it shall be the responsibility of the applicant to pay the difference. A special event permit is not required at the time of application for assistance, however if an issued special event permit is required for the event, the applicant shall follow the guidelines for the special event permitting process.

#### **GENERAL INFORMATION**

Applicant: St. Andrew's Ukrainian Religious and Cultural Center			
Is the applicant: Individual Corporation	<b>7</b> 501c3 ☐ Other		
Contact Person: IULIIA DANILOVETS			
Address: 4230 SUNBURST AVE			
City: NORTH PORT	State: FL	Zip: 34286	
Telephone No: 9414569915	Cell No.:		
Email: uafestivalswfl@gmail.com	-		
Preferred means of contact: PHONE			



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EVENT INFORMATION		
Event Name: UKRAINIAN FESTIVAL OF SOUTHWEST FL	.ORIDA	
Is the event open to public?  Yes  No  If the event is not open to the public and/or admi	Admission charged? Yes	
Location Address: 4970 CITY HALL BLVD, NORTH PORT, FL		
Date(s) of Event: 02/07/2026	Hours (start & end): 11:00 AM - 6 PM	Expected Attendance: 2000
Amount of Request \$4000	Financial Need: <b>7</b> Yes No	
Will this event occur without financial assistant	ce? 🗹 Yes 🗌 No	
Event is (check one): One-time event A	nnual event	
If annual event, how many years has your organ	nization been holding this ever	nt? 2
Prior funding from City: <b>✓</b> Yes  No	If yes, amount received	\$ 1000
Description of Event:		
Community Festival		
AFFIDAVIT OF APPLICATION: I certify that the information contained in this a knowledge, that I have read and understood the guidelines and procedures governing this progressigned by Applicant  Please Print Name	at if funding is approved, I agre	ee to abide by the
DARIA TOHASHOCKY	_	