

2012 PA RIVER SOJOURNS GRANT APPLICATION



SECTION I – CONTACT INFORMATION

Primary Contact Name (First, MI, Last)			Secondary Contact Name (First, MI, Last)		
Organization			Organization		
Job Title			Job Title		
Official Mailing Address (Street/PO Box)			Official Mailing Address (Street/PO Box)		
City	State	Postal Code	City	State	Postal Code
Phone Number	Fax Number		Phone Number	Fax Number	
Email Address			Email Address		

SECTION II – GRANTEE SIGNATORY (AUTHORIZED TO LEGALLY OBLIGATE THE GRANTEE)

Grantee Signatory Name (First, MI, Last)		Official Mailing Address (Street/PO Box)		
Organization	City	State	Postal Code	
Job Title	Phone Number		Fax Number	

SECTION III – EVENT INFORMATION

Event Name (Title or Theme)	Event Dates
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Number of Days	Number of Nights	Total River Miles Covered
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Starting location	Ending location
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Which waterway(s) will your PA River Sojourn feature?

When was your last PA River Sojourn?	How many registrants were there?
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Will there be registration fee(s) for your event? Yes No

Amount(s):

Do you plan to have official safety personnel, a safety plan, and daily safety briefings (for on-water days)? Yes No

Does your PA River Sojourn incorporate foul weather plans? Yes No

Will you be surveying your participants? Yes No

If so please provide copies or a summary in final report for promotional purposes.

Who will be providing event insurance?	We will be participating in the ACA Sojourn Insurance Program Yes <input type="checkbox"/> No <input type="checkbox"/>
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SECTION IV – EVENT DETAILS

What types of programs will you incorporate into your PA River Sojourn?

- Paddling or safety instruction
- Historical presentations
- River Cleanups
- Product demos-(rainy day activity)
- Environmental education
- Opening/closing ceremony
- Youth alternative activities
- Local community presentations
- Family Reunion
- Other—please list

Please list any supporting organizations assisting your organization with the PA River Sojourn.

Do you plan on involving local officials in your PA River Sojourn? If yes, who will you involve and how?

Please list the municipalities that your PA River Sojourn will travel through.

Please list any plans to involve local municipalities in the PA River Sojourns and related events (Community tours, festivals, etc.).

How do you plan to promote your sojourn? POWR can provide press contacts and press releases as well as literature at paddling promotional events. Would you like assistance with promotion? Yes No

How many registrants are you anticipating for your PA River Sojourn?

In the space provided, please briefly describe your PA River Sojourn. This description will be included in promotional campaigns for the PA River Sojourn Program.

SECTION V – PROPOSED BUDGET

PA River Sojourns that meet the minimum criteria are eligible for up to \$900 per on-water day, and can apply for up to \$900 per day with a maximum amount of 50% of the event's actual budget.*

Please complete the abbreviated budget below and attach a detailed, proposed budget with submission.

Total Expenses (B)		_____	All expenses associated with the implementation of a PA River Sojourn
Grant Amount Requested	-	_____	Up to \$900 per on-water day in Pennsylvania. Max 50% of program budget.
Local Match Required	=	_____	Local match required. Minimum 50% of program budget.

*PA River Sojourn Grants are administered by POWR. All grants awarded by POWR are contingent upon the PA River Sojourns Grant.

SECTION VI – GRANT APPLICATION SIGNATURES

Name of Applicant (organization)

Grantee Signatory

Print the name of the organization applying for the grant

Signature of grantee signatory

Print name of grantee signatory

Title of grantee signatory

Date Signed

Do not write below this line

Grant awarded Grant denied

Date

Grant Amount

SECTION VIII – PROJECT BUDGET (ROUND TO NEAREST \$100)

A. REVENUE		AMOUNT
GRANTS (DCNR & other)		
REGISTRATION FEES		
BUSINESS SPONSORSHIPS		
BOAT RENTALS		
OTHER _____		
TOTAL REVENUE		
B. EXPENSES		
PERSONNEL		
Staff salaries		
Contracted labor (e.g., Sojourn coordinator)		
EQUIPMENT & SUPPLIES		
Promotional Items (t-shirts, etc)*		
Banners and Signage		
Postage		
Printing		
CONTRACTUAL EXPENSES		
Facility Rental		
Advertising		
Food*		
Transportation		
Educational speaker stipends		
OTHER EXPENSES (Please list)		
TOTAL EXPENSES		
NET REVENUE (REVENUE - EXPENSES)		
C. NON-CASH MATCH		
VOLUNTEER LABOR (safety, educational, instructors, guides, organizers, etc.)		
_____ hours x \$15 rate		
PRODUCT OR SERVICE DONATIONS		
TOTAL NON-CASH MATCH		
*Food and promotional expenses are not covered by DCNR and must be paid for using matching funds.		