



NEW EVENT APPLICATION FORM

ORGANIZATION INFORMATION

Organization Name _____
 Event Name _____
 Event Description _____

EVENT INFORMATION

EVENT DETAIL

Event Location _____
 Location Address _____
 Event Day/Dates _____
 Year Event Started _____
 Times Start: _____ End: _____
 Admission Fee Spectators: _____ Participants: _____
 Parking Info/Fee _____
 Type of Event Ethnic Exhibit Fun and Food
 Historical Military Music and Dance
 Pageant/Royalty Parade Sports
 Other
 2016 Attendance Spectators _____ Participants _____ Volunteers _____

ATTENDEE DEMOGRAPHIC INFORMATION

Demographic Description _____
 Race (list percent) _____ Amer. Indian _____ Asian _____ Black/African Amer.
 _____ Hawaiian/Pacific Is. _____ Hispanic/Latino _____ Non-Hispanic White
 Gender (list %) _____ Female _____ Male
 Marital Status (%) _____ Single _____ Married/Partner _____ With Children
 Age Group (%) _____ Less than five years _____ 5-12 years old _____ 13-17 years old
 _____ 18-34 years old _____ 35-45 years old _____ 50+ years old

BOOTH INFORMATION

Booth Rental Fee Food _____ Arts and Crafts _____ Beer _____
 Booth Sizes 8 ft x 10 ft 10 ft x 10 ft 10 ft x 20 ft
 Other _____

We would be interested in the Ad Co-op program: Yes No
 We would be interested in shared sponsorships: Yes No
 We could provide sponsors a booth space: Yes No

If you want to share in sponsors, list your current sponsors below to remove any conflict:

PMO Name _____

TICKET INFORMATION

Tickets Online? Yes No
Tickets at Commission Yes No
We Accept Cash/Check Credit Cards Handling Fee?
Tickets Available At _____
Number of Entrances _____ # Ticket Gates _____
Credit Card Fees Paid _____

We are interested in online ticket sales: Yes No
We are interested in a co-op for credit card processing: Yes No

COMMUNITY IMPACT

Net \$ Amount Raised in Last Year of the Event _____
How was money used _____
How is impact measured/followed _____
If Scholarships # Given _____ Dollar Amount _____ Time period _____
Scholarship Criteria _____
How promoted _____
When winners announced _____
Criteria/information website _____
How do you promote impact _____
Other comments on impact _____

We have contact information on past recipients Yes No
We are willing to share contact information on past recipients Yes No
Do you produce an annual report Yes No

If yes, please provide a copy of your annual report with this or include us on your mailing list.

Event has an impact in Arts & Culture Education Environment
 Health & Wellness History & Heritage Safety

Describe charitable impact _____

CITY OF SAN ANTONIO IMPACT (statistical purposes only)

City provide services Yes No

If you pay for services:

Service 1:	_____	Amount Paid	_____
Service 2:	_____	Amount Paid	_____
Service 3:	_____	Amount Paid	_____
Service 3:	_____	Amount Paid	_____
Service 4:	_____	Amount Paid	_____
Service 5:	_____	Amount Paid	_____

If services are free/donated:

Service 1:	_____
Service 2:	_____
Service 3:	_____
Service 3:	_____
Service 4:	_____
Service 5:	_____