



**Quincy Tourism Commission**  
**Application for Grant Fund Requests**

**Quincy Tourism Commission**  
**Quincy Town Hall**  
**2599 County Road Z**  
**Friendship, WI 53934**  
**Phone: (608) 339-7230**  
**Email: [quincyth@frontier.com](mailto:quincyth@frontier.com)**

*Please fill out the form below and email, deliver, or mail to Quincy Town Hall.*

**NOTE: RECEIPTS WILL BE REQUIRED FOR ANY MONIES RECEIVED AS PART OF THE GRANT FOLLOW-UP REPORT.**

**Organization information:**

Legal Name: \_\_\_\_\_

Trade Name (DBA): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Contact Email: \_\_\_\_\_ Tax ID (FEIN): \_\_\_\_\_

Business Organization Type (check all that apply):

Corporation Partnership Sole Proprietorship Non-Profit/Unit of Government

**Initiative Description**

Capital Project. Event Signage Promotional Assistance

If Applicable: Start Date: \_\_\_\_\_ Completion Date: \_\_\_\_\_ Event Date: \_\_\_\_\_

Provide a Description of the initiative and a brief history of applicant's involvement in the Town of Quincy.

---

---

---

---

---

Does the initiative require Town of Quincy approvals/permits? If so, what is the plan to receive proper approvals? \_\_\_\_\_

---

---

---

Are there any contingencies that could potentially prevent the initiative from being completed? Please explain. \_\_\_\_\_

---

---

**Initiative Budget:**

Total cost of initiative: \_\_\_\_\_

Grant Request Amount: \_\_\_\_\_

How will you raise other funds to complete the initiative?

---

---

**A detailed budget of expenses must be provided for the initiative including income/expenses when submitting this form. If a budget of expenses is not provided, funding will not be approved.**

**Tourism Impact:**

What impact will the initiative have on the tourism economy for the Town of Quincy?

---

---

---

Does the initiative have potential to generate or contribute to the generation of overnight stays in the Town of Quincy? If yes, please explain.

---

---

---

Will this initiative lead to potential off-season visits by residents and non-residents? If yes, please explain.

---

---

---

**Collaboration**

Does this initiative involve other community groups and local collaboration? If yes, please explain.

---

---

---

Will this initiative involve the Quincy Tourism Commission and/or the Town of Quincy beyond this fund request?

---

---

---

**Other:**

What else should we know to help us decide whether to provide funds to assist this initiative?

---

---

---

---

---

How will you recognize the support of the Quincy Tourism Commission?

---

---

---

---

---