



SPECIAL EVENTS GRANT PROGRAM APPLICATION

Submission deadline:
September 15, 2022

1. Event Title: Fall Harvest Festival Craft & Vendor Fair

2. Date/Place of Event: Sabal Pines Park

3. Has the event site been reserved? [X] Yes [] No

4. Name of Organization: The Women's Club of Coconut Creek

Contact Person: Cheryl Blair Title: Director of Vendor Events

Phone: 954-296-7992 E-mail: wccvendorevents@gmail.com

Mailing Address: 3863 NW 67th Street Coconut Creek FL 33073-3289

5. Chief Administrative Officer/President Laura Matherlc

Phone: 954-756-1117 E-mail: wcpresidentcc@gmail.com

6. Brief Description of Event/Approximate Number of Attendees:

Our event is part of the Fall Harvest Festival sponsored by the city of Coconut Creek.

7. Attach non-profit certification (tax-exempt status) and Certificate of Incorporation as a registered entity in the State of Florida.

Attached: [X] Yes [] No

8. Bank affiliations: JPMorgan Chase

9. What is the date of your organization's original non-profit status? September 30, 1970

10. How much is total cost of your event?

11. Is your event open to the public? [X] Yes [] No

12. Percentage of Creek residents attending events: 100%

13. What is the total monetary amount requested from the City of Coconut Creek? (An itemized list showing exact dollar figures is required.) \$1,500

14. How will the funds be used?

Purchase new lawn marking flags for the field, 3 Igloo coolers for vendors to use to fill their reusable water bottles. Rental of 10x10 tents for the member table and raffle table, plus rental of 8 ft tables and chairs if the city is unable to supply them. Name buttons with our logo (reusable) for events. Dymo label tape to put names on the name buttons.

15. What are the in-kind requests from the City of Coconut Creek?

(6) 8' banquet tables, 10 chairs (will rent them if the city is unable to supply, and it's budgeted for) Small lawn sign directing vendors to their row and space for the event.

Handwritten mark resembling a checkmark and the number 21.

16. List other funding/grants that will go toward the event (i.e. cash, in-kind services, donations, grants, etc.). This is the only grant we apply for

17. What benefits and positive effects will the City of Coconut Creek receive if a grant is awarded?
All profits go to our scholarship fund that benefits high school seniors in Coconut Creek

18. What percentage of the profits will go towards charity? What percentage will go towards administrative costs? 100% / 0%

19. What precautions will be taken against the spread of Covid-19?
This is an outdoor event

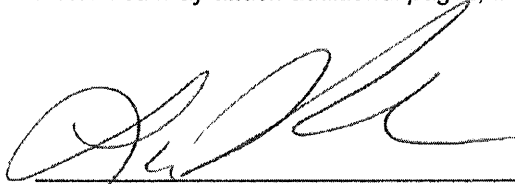
20. I am duly authorized to speak on behalf of my organization.

21. I understand that I must timely submit all the required reimbursement documentation prior to receiving reimbursement for any authorized expense under the Special Events Grant Committee's award letter.

22. I hereby certify that my organization does not and will not engage in any form of discrimination and prohibits discriminatory activity.

23. In consideration of participating in the Special Events Grant Program, my organization agrees to be fully responsible for its acts of negligence or its employees' acts of negligence when acting within the course of scope of their employment, which may arise out of, in connection with, or because of the Special Events Grant Program. Nothing herein is intended to serve as a waiver of sovereign immunity by either party under Section 768.28, Fla. Stat., nor shall anything included herein be construed as consent to be sued by any third parties in any matter arising out of the Special Events Grant Program.

Note: You may attach additional pages, if needed.



President/CEO Signature

**PROPOSED EVENT BUDGET
CITY OF COCONUT CREEK
SPECIAL EVENTS GRANT PROGRAM**

Name of Organization: The Women's Club of Coconut Creek

Name/Date of Event: Fall Harvest Festival Craft & Vendor Fair November 19, 2022

ANTICIPATED REVENUES

Your Organization's Contribution: \$ Volunteers at the event

Additional Revenue Sources:

Ticket Sales: \$3,000

Donations, Sponsorships & Contributions: _____

Other - (List): _____

Total Anticipated Revenue: \$ 3,000.00

ANTICIPATED EXPENDITURES

Advertising and Publicity: \$ 400.00

Equipment Rentals: \$ 700.00

Facility Rental: _____

Insurance: \$100.00

Lodging: _____

Security/Police: _____

Printing: \$100.00

Postage: _____

Supplies & Materials: \$400.00

Professional Fees: _____

Technical Equipment Expenses: _____

Travel and Transportation: _____

Other: _____

Total Anticipated Event Expenditures: \$ 1,700.00

Disallowed Expenses:

Salaries, Benefits & Permanent Equipment

We hereby certify that all figures, facts, and representations made in this statement are true and correct to the best of my knowledge.

Chief Administrative Officer/President Signature: 

Date: 9/12/2022

Chief Financial Officer/Treasurer Signature: 

Date: 9/12/2022