



San Diego Unified Port District Financial Assistance Program 2010-2011 Application



Directions:

Complete and submit 3 copies of this application, along with all required attachments, to the Port of San Diego by 5:00 pm Friday, November 6, 2009.

Checklist of Attachments to Financial Assistance Program Application			
	Equal Opportunity Statement (form provided). Required of all applicants.		Detailed budget for the program or event being applied for. Budget must include <u>all</u> projected income sources as well as expenses. Required of all applicants.
	Evidence of non-profit status. Required of all applicants except government agencies.		
	Organization's detailed financial statement for the most recently completed fiscal year. Required of all non-government applicants.		Letter(s) of endorsement from city, non-government, and civic/service organization(s). Optional.
	Organization's detailed budget for the current fiscal year. Required of all non-government applicants.		

Before completing this application, please read and acknowledge, with your signature, the following:

- If selected to receive financial assistance from the Port of San Diego, the recipient is required to sign a binding agreement in which they agree to provide service(s) in return for the funding and/or services that the Port provides. These services will be listed on a Scope of Services that is part of the agreement for financial assistance.
- Financial assistance funding is paid to recipients following their submittal of an invoice(s) and proof of having fulfilled their requirements listed in the Scope of Services.
- Organizations selected for financial assistance will be required to obtain and provide proof of a Commercial General Liability Policy covering any bodily injury, property damage, personal injury or advertising injury associated with their event or program. This policy, for which specific requirements will be contained in their agreement, shall include an endorsement naming the Port of San Diego as an additional insured.
- Organizations selected for financial assistance for an event in a Port park are required to submit a completed park permit application at least 90 days prior to their event and, even if park permit fees are being waived, to submit the requisite damage deposit for their event.

I have read and I understand the foregoing information regarding a service agreement with the Port of San Diego, the policy on payments, the requirement to obtain and provide proof of insurance for my event or program, and the requirements for submitting a park permit application and damage deposit.

Signature: _____

Printed Name: _____



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If typing in your information, please use 12 point type in all blocks. Please attach additional pages if necessary for any of the responses.

Applicant Information	
Organization	
Event/Program Name	
Date(s)	
Location(s) Include name(s) and location(s) of parks or facilities where event or program will be conducted.	

Contact/Signatory Information			
Provide your contact person for issues specific to your event or program, the contact person for all administrative and financial issues for your organization, and the signatory for your Financial Assistance agreement, if one is executed. They can be the same individual.			
Event/Program Contact Person			
Address		Phone	
		Cell	
		Fax	
		Email	
Administrative/Financial Contact Person			
Address		Phone	
		Cell	
		Fax	
		Email	
Signatory for Financial Assistance Agreement			
Title			
Organization			

Event/Program Information

**Purposes &
Goals**

Describe the purposes and goals of your event or program. Include the target audience, who your event or program benefits and how. Include projected attendance to your event(s) and numbers of individuals who are anticipated to take part in your program(s). Attach additional sheets if necessary.

**Relevance to
BPC Policy
025**

Describe how the event or program meets the provisions of BPC Policy 025 (copy attached), Sections 2(c) and 3(b), which specify the types of activities that are eligible for consideration under the Financial Assistance Program. Attach additional sheets if necessary.

<p>Event/Program History</p>	<p>Provide a brief history of your event or program that includes the number of years it has existed and how it has evolved throughout that time, including attendance and participation. Your description should include but not be limited to how it has been advertised and promoted to your community and the region (if applicable) in the past, and how its objectives, scope and size have changed – if applicable – throughout its existence. Attach additional sheets if necessary.</p>
<p>Sponsor Recognition</p>	<p>Describe how your organization would recognize the Port of San Diego for its support – such as in news releases, flyers, promotional materials, programs and banners. Attach additional sheets if necessary.</p>

Current Year (Fiscal Year 2009-2010) Funding

If your event or program was or will be conducted in the current fiscal year (July 1, 2009– June 30, 2010), attach a detailed budget or financial statement for this event/program for the current fiscal year. Additionally, list below the cash funding you have received or will receive from outside sources, including the Port. See the attached sample budget. Attach additional sheets if necessary.

Source	Amount
Total	\$

Funding Requested for Fiscal Year 2010-2011

Attach a detailed budget or financial statement for this event/program for fiscal year 2010-2011 (July 1, 2010– June 30, 2011). Include all projected costs as well as sources of income. See the attached sample budget for guidance. Additionally, list below the amounts of cash funding you have applied for or intend to apply for from all outside sources, including the Port, for fiscal year 2010-2011. Attach additional sheets if necessary.

Source	Amount
Total	\$

Event/Program Beneficiaries

Please list below any organizations to which you intend to donate any or all of the proceeds from this event or program, along with the amount or percentage that each will receive.

Beneficiary Organization	Amount or Percentage of Proceeds

Admission Charges/Entry or Enrollment Fees

Please list and describe all fees charged to participants in your event or program. If there are varying levels of ticket prices or fees, describe your ticket/fee structure.

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Funding Requested for Fiscal Year 2010-2011

List the exact amount of **funding** you are requesting for fiscal year 2010-2011.

Funding Requested: \$ _____

Services Requested for Fiscal Year 2010-2011

The services provided by the Port for Financial Assistance events **are limited to the waiving of park fees and the providing of the Port stage.** Approval is subject to park availability.

Visit www.portofsandiego.org to learn what Port parks may be available for your use. Follow the process outlined there to request availability and to start the application process. The stage can be requested alone if your activity is not scheduled at a park, or you can apply for the use of the stage along with the use of the park. The providing of the stage is dependent upon availability of the stage and setup staff. The Port requires an appropriate damage deposit for the use of Port parks.

List below the exact services you require. Please provide the following information now in order to assess the value of your request.

Waiver of fees at _____ (name of park)

Park dates, including any setup or breakdown days: _____

Number of setup and breakdown days required: _____

Projected event attendance for each event day at park: _____

Date(s) requiring Port stage: _____

Computed value of services (Port staff will compute):

Endorsements

Please attach to this application any letters of endorsement of your event or program from a Port member city administration or civic/non-government organization such as a Chamber of Commerce or service organization.

Applicant Signature

I certify that the information contained in the Application for Financial Assistance is true and correct to the best of my knowledge.

Printed Name

**Signature &
Date**

**Port of San Diego Financial Assistance Program
Sample Budget**

**Organization Name
Event/Program Name**

Income

Category	2009 Budget	2009 Actuals	2010 Budget
Ticket/entry sales	\$ 20,000.00	\$ 22,000.00	\$ 24,000.00
Sponsorships	\$ 85,000.00	\$ 82,400.00	\$ 84,000.00
Raffle tickets	\$ 1,500.00	\$ 2,000.00	\$ 2,700.00
Exhibitor booth fees	\$ 1,000.00	\$ 2,200.00	\$ 2,900.00
Total	\$ 107,500.00	\$ 108,600.00	\$ 113,600.00

Expenses

Category	2009 Budget	2009 Actuals	2010 Budget
Advertising	\$ 3,300.00	\$ 3,285.00	\$ 4,000.00
Brochures/Flyers	\$ 1,500.00	\$ 1,901.00	\$ 2,500.00
Clerical	\$ 992.00	\$ 850.00	\$ 1,000.00
Insurance	\$ 1,500.00	\$ 1,511.00	\$ 1,600.00
Medical Aid	\$ 2,200.00	\$ 2,305.00	\$ 2,400.00
Office Supplies	\$ 500.00	\$ 369.42	\$ 350.00
Postage	\$ 1,000.00	\$ 940.00	\$ 1,100.00
Printing/Copying	\$ 1,500.00	\$ 1,300.00	\$ 1,500.00
Photography	\$ 2,500.00	\$ 1,833.00	\$ 2,250.00
Portable Restrooms	\$ 500.00	\$ 467.00	\$ 500.00
Promotional Items	\$ 1,875.00	\$ 1,875.00	\$ 1,875.00
Refreshments	\$ 1,200.00	\$ 1,200.00	\$ 1,250.00
Security	\$ 500.00	\$ 677.00	\$ 750.00
Signs/Markers	\$ 500.00	\$ 995.00	\$ 1,000.00
Trash/Recycling	\$ 500.00	\$ 350.00	\$ 450.00
Traffic Control	\$ 2,000.00	\$ 2,100.00	\$ 2,500.00
T-Shirts	\$ 8,000.00	\$ 7,726.00	\$ 10,000.00
Website	\$ 2,160.00	\$ 2,171.00	\$ 1,500.00
Total	\$ 32,227.00	\$ 31,855.42	\$ 36,525.00