



Tourism Financial Assistance APPLICATION

Applications must be submitted by: **MARCH 27, 2026**

Grants will be awarded On: **APRIL 14, 2026**

Note: Return signed application to:

cbadmins@montgomerycountyil.gov. If you need to use additional pages for supporting evidence, please attach those to the application.

Name of Event: _____

Date(s) of Event: _____

Location of Event: _____

Address of Event Venue (if applicable): _____

Organization: _____

Contact Person: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: _____ E-mail: _____

Amount Requested (No greater than \$1,000): \$ _____

List event website, Facebook, Instagram page(s): _____

I, _____, hereby agree to reimburse the County Tourism Account the full amount of the grant awarded if the event is cancelled for any reason other than weather or emergency.

Signature: _____

FOR Personnel/Development COMMITTEE USE ONLY

Date Received: _____

Date Approved/Denied: _____

Amt. Approved: _____

Date Paid: _____

Date Final Report Due: _____
Date Final Report Received: _____

5. How do you plan to collect data to measure the results of your event?

Event attendance, # of overnight stays, profile of attendees, etc.

6. Does your organization hold fundraisers to create operating capital for this event OR do they solicit sponsorships?

Yes No

7. Attach an itemized budget showing what expenditures this grant assistance will cover.

Please include any pertinent vendor information

The Montgomery County Development & Personnel Committee and Montgomery County Board reserve the right to require additional information to show compliance with the standards described within these guidelines. Please initial: _____

If awarded financial assistance, a Final Report to Montgomery County Personnel & Development Committee must be received 90 days after your event date (or final event date if the event spans multiple dates). This includes copies of receipts for all items/services purchased as part of the grant awarded. If this report is not submitted on time, your organization may not be eligible for event funding assistance through the County. Please initial: _____

The Montgomery County Personnel & Development Committee will review and score all applications to determine funding decision and amount, which will be based on the guidelines set above. Note: The Montgomery County Personnel & Development Committee and Montgomery County Board reserve the right to fund events at an amount less than the amount requested.

Applications may be emailed to: cbadmins@montgomerycountyil.gov

Or Mailed to: Montgomery County Personnel & Development Committee
Attn: Tourism Grant Application
#1 Courthouse Square Room 202, Hillsboro, IL 62049



Grant Report

**Please complete and send back to the County Development Committee
within 90 days after the event date
(or final event date if event spans multiple dates.)**

Name of Event: _____

Date(s) of Event: _____

Location of Event: _____

Address of Event *(if applicable)*: _____

Organization: _____

Contact Person: _____

Daytime Phone: _____ E-mail: _____

Please confirm amount received: \$ _____

Attach copies or receipts to report. (Please redact any personal account information.)

Do you think this grant helped you reach a larger audience and/or provide a better event experience?

Does your organization have any takeaway thoughts they would like to share with the County Personnel/Development? (Things you wish to change next year, increase or decrease next year?)
