

GILLETTE MAIN STREET DOWNTOWN

MICRO MARKETING GRANT

APPLICATION

Is your business located in Downtown Gillette? _____

Are you a Friend of Gillette Main Street, at least the Bronze (\$125) Level? _____

Legal Name of Business/Organization: _____

Doing Business As (if applicable): _____

MAILING ADDRESS

Mailing Street Address: _____

Mailing City: _____ Mailing State: _____ Mailing Zip: _____

PRIMARY PHYSICAL ADDRESS IN DOWNTOWN GILLETTE

Street Address: _____

PRIMARY CONTACT

First Name: _____ Last Name: _____

Phone: _____ Email: _____

MAKE CHECK PAYABLE TO: _____



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PROGRAM NAME/PROJECT IDEA: _____

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Funds Request: _____

If this is a co-op program/project, are all involved businesses/organizations a Friend of Gillette Main Street in at least the Bronze (\$125) Level? _____

PROJECT DESCRIPTION (15 POINTS)

Question 1: Tell us about your project, and what you want to accomplish?

BUSINESS SELF-EVALUATION (15 POINTS)

Question 2: Tell us about your customers? Are they local? Are they visitors? Age/Gender: _____

Question 3: How does your business contribute to Downtown Gillette as a travel destination? _____

Question 4: Tell us how you partner with other Downtown Gillette businesses, Campbell County Tourism, and Gillette Main Street? _____

MARKETING MESSAGE AND PROGRAM (25 POINTS)

Question 5: What is your brand message or business motto? _____

Question 6: Please list your business website and social media handles: _____

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Question 7: Marketing Calendar and Budget

The charts below offer you space to list your project expenditures. Only fill in areas that pertain to your project.

Media Outlet(s)	Ad Type, Size, and Frequency	Placement Data (Month, Year)	How does this reach your Customer/Goals?	Total Cost	Notes
<i>Example: New Record, Social Media, County 17, Billboards</i>	<i>¼ page ad, single run</i>	<i>October 2022</i>	<i>Over half of my customers visit from South Dakota and surrounding areas.</i>	<i>\$750</i>	<i>All \$150 from the grant and contribute an additional \$600 out of pocket.</i>

Specific Item (design services, photography, art, display, production, etc)	Anticipated Completion Date (Month, Year)	How does this reach your Customer/Goals?	Total Cost	Notes
<i>Example: Interior Mural</i>	<i>April 2022</i>	<i>This will garner renewed interest in physically visiting our business.</i>	<i>\$1500</i>	<i>The mural costs more than \$1500, but we are covering additional expenses out of pocket.</i>



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PERFORMANCE MEASURES (5 POINTS)

Question 8: What are your program/project goals, and how will you measure them? _____ Page |

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TERMS AND CONDITIONS

1. This grant program is intended to help businesses and organizations in Downtown Gillette with marketing.
2. Only recognized Friends of Gillette Main Street businesses at the minimum Bronze Level (\$125) and who are locating in Downtown Gillette are eligible to apply. (If funds are to be used in a co-op marketing situation, all involved businesses must be Bronze Level Friends of Gillette Main Street)
3. Funds must be used for marketing only. Operational expenses are not allowed.
4. Completed applications will only be accepted if submitted by emailing gillettemainstreet@gmail.com. Grading of applications is expected to take roughly two weeks and will be completed by the GMS Organization Committee.
5. This is a first come first-serve grant program. The program will remain open until all funds are disbursed or until June 30, whichever occurs first.
6. Upon approval of your application, reimbursement funds will be available once required documentation of project expenses (receipts, proof of payment) have been submitted.
7. Any changes in the applicant's program that arise after notification of award must be submitted in writing and approved in writing by the GMS Organization Committee. Failure to do so may result in default and any funding awarded to date may be refundable to the Gillette Main Street.
8. All programs should be completed within 6 months of the award notification date.
9. All program placements must be completed no later than June 30 of the awarded fiscal year.
10. The CCCVB and Gillette Main Street must report on the effectiveness and show a return on investment of the Gillette Main Street Downtown Micro Marketing Grant to our stakeholders. To that end, you will be required to provide a brief final report on the effectiveness and outcomes of your programs.



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11. A final report must be submitted to GMS within 60 days of the completion of the program detailing the results of the project. The Final Report is a simple summary of the results and other outcomes of your project. The Final Report is located on the next page of the application.

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12. Failure to provide the Final Report, or failure to meet guidelines stated in the application, may result in businesses/organizations being in default and any funding awarded to date may be refundable to the Gillette Main Street. If Gillette Main Street must refund funds to the CCCVB because of the applicant's action or omission, the applicant must refund the same amount to Gillette Main Street.

AUTHORIZED SIGNATURE

I certify that I have read and understand am authorized to complete and submit this application on behalf of the applicant. I verify that the statements contained herein are true, accurate, and complete. I acknowledge that false and inaccurate statements made on the application are grounds for immediate rejection of the application.

First Name: _____ Last Name: _____

Email: _____ Phone: _____

Signature: _____ Date: _____

Submit by sending to: gillettemainstreet@gmail.com

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FINAL REPORT

Business/Organization Name: _____

Program Name/Project Idea: _____

Mailing Address: _____

Phone: _____ Email: _____

Project Start Date: _____ End Date: _____

- Did you make any significant changes to your project from what was described in your original application? Yes _____ No _____
- If you made significant changes, did you notify GMS before you made the changes? Yes ____ No ____
- Were Gillette Main Street and VISITGILLETTE credited in all marketing materials? Yes ____ No ____
- How did you publicize your project? _____
- Were your marketing efforts successful? _____ How did you measure this? _____
- Did you co-op with any other Downtown Gillette Businesses? _____ How many? _____
- Who did you co-op with? _____

Attendance Itemization: Please provide approximate figures

Total Number of Attendees	Total Number of Adults	Total Number of Youths Under 18	Percent increase/decrease in sales from previous year's date/event	Was this project successful? How did you measure the outcome?

