

TOURISM HAMILTON SPORT TOURISM INCENTIVE APPLICATION

Kindly complete this form and forward to Christine Roy, Tourism Coordinator – Sales 28 James St. N., Hamilton, Ontario L8R 2K1 Phone: 905-546-2424 x5362 E-mail: christine.roy@hamilton.ca

Contact Person:	Telephone:
E-mail address: Organization Name (Cheque will be made out t Current President: Address:	Fax: to this name):
Website: Name of Sporting Event: Date of Sporting Event: Location of Sporting Event:	
Provide a brief history of your organization (Constitution, Charter and/or By-Laws) and indicate if it is incorporated as a non-profit or charitable organization:	
Non-profit Registration Number (required):	
What are the general objectives and/or functions of your organization?	
Provide number of contracted accommodation bedroom room nights used in at the conference this application covers (ie. 10 rooms per night x 3 nights = 30 room nights). Minimum requirement: 25 room nights. Please provide supporting documents, if requested (contract with hotel and venue)	
Name of hotel/residence that room blocks wer	e booked at:
Provide number of total participants at previou	is year's sport event and anticipated number for the event in Hamilton
COMPETITORS: Age Group: Number of Spectators: Number of Officials: Number of Volunteers:	
Amount of Grant Request:	
Explain briefly the nature of the event for which financial assistance is requested. (i.e. Welcome Ceremonies, Awards	

THANK YOU FOR YOUR EFFORTS IN BRINGING SPORTING EVENTS TO THE CITY OF HAMILTON

Presentation, Banquet, Transportation etc.).