



## COMMUNITY EVENTS FUNDING GRANTS TERMS OF AGREEMENT

In accepting the offer of \$ \_\_\_\_\_, I/we \_\_\_\_\_ name of applicant(s) \_\_\_\_\_ on behalf of \_\_\_\_\_ name of organisation \_\_\_\_\_ agree to the following conditions:

1. I/we will carry out the event within the indicated time frame in the application.
2. I/we agree that the grant money will be used for \_\_\_\_\_ state project/activity funding was given for \_\_\_\_\_ and I/we agree that it will not be used for any other purpose. I/we understand that failure to do so may result in steps being taken to recover the grant in part or full.
3. I/we will return a final written report (as attached) and an income and expenditure report (actuals vs budget) within three months after the completion of the project and that although I/we will retain copyright, I/we consent to copies being available to the Ashburton District Tourism Development Board.
4. Should the event not go ahead, I/we shall immediately contact Experience Mid Canterbury Tourism so that the Ashburton District Tourism Development Board can be notified and a decision made regarding the funds.
5. I/we accept that the names of grant recipients and the amounts of grants will be made public.
6. I/we will notify Experience Mid Canterbury Tourism in writing of any change of address, office holders of the organisation or other contact details should this occur before I/we return the final report.
7. The support of Experience Mid Canterbury Tourism will be acknowledged in publicity, publications and signage associated with event (an example of the logo to be used is placed at the bottom of this form and an electronic version is available from the Experience Mid Canterbury Tourism office.)
8. I/we will collect Experience Mid Canterbury Tourism promotional display for use at our event and will return intact and undamaged within 48 hours after the event.
9. Experience Mid Canterbury Tourism will pay the grant funds in form of a cheque on the 20<sup>th</sup> of the month following receipt of an invoice to Experience Mid Canterbury Tourism (with copies of relevant invoices paid).
10. I/we accept that the Ashburton District Tourism Development Board may conduct random audits on our event i.e. feedback survey form.
11. I/we understand the information given in the Final Written Report will be used as information if further funding is applied for, for the same event.
12. I/we will provide regular event updates to the Experience Mid Canterbury Tourism office so that event details can be updated on [www.MidCanterburyEvents.com](http://www.MidCanterburyEvents.com) the free online event calendar for Mid Canterbury.

Applicant Name(s) \_\_\_\_\_  
 Organisation Name \_\_\_\_\_  
 Signature(s) \_\_\_\_\_  
 Date \_\_\_\_\_

Please return to: Experience Mid Canterbury Tourism  
 211a Wills Street, PO Box 482, Ashburton 7740  
[events@MidCanterburyNZ.com](mailto:events@MidCanterburyNZ.com)