

Cariboo Chilcotin Coast Tourism Association

Festivals and Events Proposal – Application Form

Name of Festival or Event: _____

Dates of Event: _____ Location of Event: _____

Primary Marketing Contact Person: _____

Tel: _____ Fax: _____ Email: _____

Description and history of the event, including past attendance:

Description of community involvement and support:

Other Cariboo Chilcotin Coast Tourism Association Stakeholders participating in the Festival or Event:

Complete listing of all proposed Marketing Activities (Newspaper, Magazines, Brochures, etc.)

I. Name and Description of Supplier (ie. Newspaper, Magazine, Radio Station, etc):

A. Budget Amount: _____ B. Run Date of Ad: _____

C. Deadline for Ad Submission: _____ D. Supplier Contact Person: _____

E. Mailing Address: _____ City: _____ PC: _____

F. Phone: _____ Fax: _____ Email: _____

THE CARIBOO CHILCOTIN COAST DELIVERS

Adventures of a Lifetime. Everyday.

Cariboo Chilcotin Coast Tourism Association

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Marketing Activities Continued:

II. Name and Description of Supplier (ie. Newspaper, Magazine, Radio Station, etc):

A. Budget Amount: _____ B. Run Date of Ad: _____

C. Deadline for Ad Submission: _____ D. Supplier Contact Person: _____

E. Mailing Address: _____ City: _____ PC: _____

F. Phone: _____ Fax: _____ Email: _____

III. Name and Description of Supplier (ie. Newspaper, Magazine, Radio Station, etc):

A. Budget Amount: _____ B. Run Date of Ad: _____

C. Deadline for Ad Submission: _____ D. Supplier Contact Person: _____

E. Mailing Address: _____ City: _____ PC: _____

F. Phone: _____ Fax: _____ Email: _____

IV. Name and Description of Supplier (ie. Newspaper, Magazine, Radio Station, etc):

A. Budget Amount: _____ B. Run Date of Ad: _____

C. Deadline for Ad Submission: _____ D. Supplier Contact Person: _____

E. Mailing Address: _____ City: _____ PC: _____

F. Phone: _____ Fax: _____ Email: _____



The Cariboo Chilcotin Coast Tourism Association: Contact: Shawna Hinsche

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