

# City of Hudson Events Funding Request Application

Please use this form to request funding for an event, event series, or other tourism-related initiative from the City of Hudson. Applications will be accepted through Friday, April 12th at 5 pm and reviewed by the Finance Committee of the Common Council at their meeting on Monday, April 15th.

Email \*

tykeyhedge63@gmail.com

## Applicant Information

First Name \*

Tyrone

Middle Initial

Last Name \*

Hedgepeth

Organization \*

Hudson Family Reunion Committee

Street Address \*

335 state street

City \*

Hudson

State \*

NY

Zip Code \*

12534

Phone \*

5185281742

Email \*

Tykeyhedge63@gmail.com

Event Date(s) \*

Event or project must take place between April 16, 2024 and December 31, 2024 to be considered. Past events or completed projects will not be funded.

9/7 & 9/8/2024

Desired Funding \*

The maximum award from this program is \$5,000.

5000

Have you received funding from the City of Hudson previously? \*

Yes

No

Is your event a recurring event in the City of Hudson? \*

Yes

No

Will your event conform with all required Federal and State accessibility laws, including the Americans with Disabilities Act (ADA)? Please provide detail in the Project Description section. \*

Yes

No

Have you received alternative funding to date? \*

Yes

No

Alternative Funding Amount

How much alternative funding have you secured? \*

Project Overview

Description of Project \*

*This description must include **all** relevant details (i.e., requested funding for print advertising must include name of newspaper or magazine, size of ad(s), number of ads, times run, sample copy, current advertising rates and projected rates). Just stating "funding for ads in The Register Star" will not be sufficient. Similar detail must be provided for other types of projects.*

*Use the file upload feature at the end of this section to attach additional documentation if necessary.*

Live entertainment, music, guests, groundskeeper fees, operational needs

Purpose of Project \*

*Describe the goals you or your organization hope to achieve during the course of this event/project.*

The Hudson Family Reunion's goal to honor the rich legacies of families past, present and future of Hudson. This annual event will celebrate the love and support for the City of Hudson. The history of Hudson is important and should be preserved for future generations. After all it takes families to create and raise a community.

Why should the Project be funded from the City of Hudson Events budget? \*

This should be funded as this event is specifically created for the residents and families that live here

How will the Project bring a positive impact to the City of Hudson, its residents, and visitors? \*

It will bring them together and embrace past, present and those who have been reunited to Hudson along with networking.

Additional files for Project Overview

Funding Request Breakdown

Describe how and when funding will be used. \*

Live entertainment, guest, music and operational needs

Identify other funding being sought or anticipated by this Project. \*

*Include source name, amount, and use. If no other funding is anticipated, type, "Not applicable."*

Not applicable at this time

#### Disclaimer and Submission

I acknowledge that acceptance of this Project for funding by the City of Hudson Common Council Finance Committee is subject to the availability of funds for such projects in its budget and the authorization of such expenditures by the Common Council of the City of Hudson, NY. \*

*Type your full name to sign and acknowledge.*

Tyrone Hedgepeth

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