



Visitors Investment Fund

Administered by the 1000 Islands International Tourism Council

Grant Application Form

SECTION 1: Applicant Information

- **Organization/Business Name:** _____
 - **Primary Contact Person:** _____
 - **Title/Role:** _____
 - **Mailing Address:** _____
 - **City/State/Zip:** _____
 - **Phone Number:** _____ **Email:** _____
 - **Type of Applicant (check one):**
 - Private, for-profit operator
 - Not-for-profit organization
 - Municipality (town, village, or City of Watertown)
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SECTION 2: Project Overview

- **Project Title:** _____
 - **Project Location (must be within Jefferson County):** _____
 - **Project Type (check all that apply):**
 - Tangible visitor infrastructure
 - Public-facing enhancements
 - Visitor education/engagement
 - Other (please describe): _____
 - **Total Project Cost:** \$ _____
 - **Amount Requested from Visitor Impact Fund (max. \$25,000):**
\$ _____
 - **Cash Match Provided (minimum 10% required):** \$ _____
 - **Total Additional Leveraged Funds (if any):** \$ _____
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SECTION 3: Project Narrative

(Attach additional pages if necessary)

1. Project Description:

Provide a clear summary of your project, including scope of work and intended use of funds.

2. Alignment with Strategic Priorities:

Explain how your project addresses one or more of the Fund's priorities:

- Creating/enhancing visitor experiences
- Extending visitor stays/increasing spending
- Collaboration across entities/sectors
- Leveraging additional resources
- Providing lasting, visible, measurable results
- Improving residents' quality of life

3. Visitor & Community Impact:

How will this project improve the visitor experience in Jefferson County? How will it also benefit local residents?

4. Project Timeline:

List key milestones and estimated completion date.

5. Expected Outcomes & Measures of Success:

What specific results do you anticipate (visitor numbers, length of stay, spending, accessibility, etc.)? How will success be measured?



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SECTION 4: Budget

Provide a detailed project budget including all funding sources.

Budget Item	Cost	Funding Source (Fund, Match, Other)
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TOTAL	\$ _____	
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Attach proof of match funding (bank statement, award letter, etc.).

SECTION 5: Supporting Documentation

Please attach (if applicable):

- Project site photos, renderings, or designs
 - Letters of support or partnership commitment
 - Tourism data or research supporting the project need
 - Other relevant documents
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SECTION 6: Application Agreement

By signing below, the applicant acknowledges:

- The information provided is accurate and complete.
- The project meets eligibility requirements.
- A minimum 10% cash match is secured.
- A final project outcomes report will be submitted to the 1000 Islands International Tourism Council within 30 days of completion.
- Public acknowledgment of the Jefferson County Visitors Investment Fund will be included in materials related to the project.

Recipient chief officer name: _____

Chief officer signature: _____

Date: _____



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Submission Instructions

Applications must be received by:

- **Round 1:** April 30, 2026
- **Round 2:** August 1, 2026

Submit completed applications and supporting materials to:

1000 Islands International Tourism Council

Attn: Visitors Investment Fund Review Committee

43373 Collins Landing Road, Alexandria Bay, NY 13607

Or email: corey@visit1000islands.com