

# Big Horn Tourism Breakthrough Project

## Business Mini-Grant Program

### Big Horn Tourism Business Marketing Mini-Grant Program Application

#### I. Eligibility

- a. Identify all of the Big Horn County communities the business is located (please mark all that apply):
- ☐ Hardin
  - ☐ Crow Agency
  - ☐ Lodge Grass
  - ☐ Fort Smith
  - ☐ Busby
  - ☐ Other: \_\_\_\_\_
- b. Identify the type of storefront your business currently operates as of the application date:
- ☐ Brick-and-mortar retail store
  - ☐ Restaurant or café
  - ☐ Service/office location (e.g., professional services, consulting)
  - ☐ Market stall, kiosk, or booth
  - ☐ Studio or workshop open to the public
  - ☐ Home-based business with physical storefront
  - ☐ Other: \_\_\_\_\_
- c. Is your business currently registered and in good standing with the Montana Secretary of State?
- ☐ Yes
  - ☐ No
- If yes, please provide your Entity ID Number: \_\_\_\_\_
- d. Select your organizations type:
- ☐ For-profit
  - ☐ Non-profit
  - ☐ Other



**MONTANA**  
DEPARTMENT OF COMMERCE

# Big Horn Tourism Breakthrough Project

## Business Mini-Grant Program

### II. Organization Applicant Information

Please provide the following details for the lead applicant. The applicant is the primary business or organization applying for this funding opportunity. If selected, the applicant will enter into a contract with the City of Hardin and will be the direct recipient of program funding.

---

ORGANIZATION NAME

---

APPLICANT FIRST NAME

---

APPLICANT LAST NAME

---

APPLICANT TITLE

---

PHONE NUMBER

---

EMAIL ADDRESS

---

PHYSICAL - STREET ADDRESS

---

CITY

---

STATE

---

COUNTY

---

MAILING – STREET ADDRESS

---

CITY

---

STATE

---

COUNTY

### III. Project Overview

- a. Within one to five sentences, provide a brief summary of what the funding will be used for.

---

---

---

---

---

- b. What are the primary goals of the marketing effort you are proposing?

---

---

---

---

---



**MONTANA**  
DEPARTMENT OF COMMERCE

# Big Horn Tourism Breakthrough Project

## Business Mini-Grant Program

---

- c. Describe the strategies and tactics you plan to use (e.g., social media, print ads, events, digital campaigns).

---

---

---

---

---

- d. How does this marketing effort align with the objectives of our program/grant?

---

---

---

---

---

#### IV. Design & Planning

Do you own the business you are applying on behalf of?

- ☐ Yes ☐ No (If no, attach owner authorization)

#### V. Budget

DOWNLOAD and review BHBTP Budget Form, [Attachment A](#).

IF awarded, the applicant will be required to fill out the budget form.

#### VI. Documents to Include

- ☐ Business Owner authorization letter (if not the applicant)

#### VII. Certification

I understand that this grant is reimbursement-based and subject to approval. I certify that the information provided is accurate and complete, and I agree to comply with program requirements.

Application Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



**MONTANA**  
DEPARTMENT OF COMMERCE

Big Horn Tourism Breakthrough Project Business Mini-Grant Program Budget Template

A maximum of \$3,000 in total grant funding is available across both Mini-Grants within the BHTBP Business Mini-Grant Program. You are required to submit a completed budget form for each grant upon being awarded.  
*Refer to PCTGP Guidelines for eligible and ineligible uses of funds.*

EXPENSE LINE ITEM BELOW:		BHTBP MINI-GRANT FUNDS REQUESTED	OTHER FUNDING SOURCES	TOTAL
1	Line item narrative for BHTBP funds:			\$0.00
2	Line item narrative for BHTBP funds:			\$0.00
3	Line item narrative for BHTBP funds:			\$0.00
4	Line item narrative for BHTBP funds:			\$0.00
5	Line item narrative for BHTBP funds:			\$0.00
6	Line item narrative for BHTBP funds:			\$0.00