

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

If yes, please provide your Entity ID Number: _____

No

d. Select your organization's type:

For-profit

Non-profit

Other



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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?



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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: _____



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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