**REGIONAL TOURISM ORGANIZATION 7**

**PARTNERSHIP PROGRAM**

COVID-19 RECOVERY SUPPORT 2021/22

DETAILS

**Who is eligible:**

* Tourism Operators
	+ defined as a consumer facing organization that has direct access to the tourism consumer and relies directly on that consumer for their income
* Must have been in business one year from the date of application
* Must
	+ *be currently serving* the tourism consumer within BruceGreySimcoe, OR
	+ *have served* the tourism consumer at some point since April 2021, OR
	+ *be planning to serve* the tourism consumer within 45 days of the application date (e.g. a seasonal business)
* Tourism Operators are permitted to apply for other similar programs from other assistance programs
* Available on a “First Come, First Served”basis until funds are allocated
* You may access this program (and vice-versa) if you have benefitted from RTO7’s Consumer Confidence Video or Image (under Resources) or Operations Implementation Program (under Programs), however you cannot be reimbursed for the same expense twice
* You may only apply once for this program and **expenses must be incurred between April 1, 2021 and March 31, 2022**

**What can you expect:**

* RTO7 will reimburse a minimum of $500 and a maximum of $2,000 pre-tax towards your matching investment (i.e. we’ll **reimburse 50% of the pre-tax expense**) in capital expenditures related to COVID safety and security (e.g. a patio expansion by a restaurant to accommodate more patrons, furniture, heaters, barriers, large scale sanitization equipment, booking and POS systems, etc.)

**What’s expected of you:**

* You will need to meet/agree to the requirements in the application below (please let us know if you have questions about the application – these requirements are *not* onerous)
* You will **need to provide copies of receipts** for the pre-tax amount you are claiming

This fund is made possible by the Government of Ontario and the Ministry of Heritage, Sport, Tourism and Culture Industries.

**REGIONAL TOURISM ORGANIZATION 7**

**PARTNERSHIP PROGRAM**

COVID-19 RECOVERY SUPPORT 2021/22 APPLICATION

*Please ensure your application is complete and accurate for consideration; incomplete applications will lose priority and may not be followed up on*

|  |  |
| --- | --- |
| Tourism Operator Legal Name (and Operating Name if different) |  |
| Business Number (as proof of operation) |  |
| Business Address |  |
| Business Web Site URL |  |
| Business Email Address |  |
| Business Telephone Number |  |
| **Requested** Amount of Funding * 50% of your eligible expenses will be reimbursed (i.e. minimum spend pre-tax is $1,000 to get $500; maximum spend is $4,000 to get $2,000)
* Attach copies of receipts

If more than one receipt is attached, please also include here a list of supporting receipts with pre-tax totals. Expenses used may not be used to access other RTO7 programming. |  |
| I understand that our operation must be in compliance with [‘A Framework for Reopening our Province’](https://www.ontario.ca/page/reopening-ontario) and other relevant COVID-19 compliance measures | \_\_\_ Y \_\_\_ N  |
| Maintain a current operator listing (free) on [www.brucegreysimcoe.com](http://www.brucegreysimcoe.com). Contact Allison Davies adavies@rto7.ca 705-888-8728 for assistance if required | I do \_\_\_\_ I will \_\_\_\_\_\_ (check one) |
| Register for a [Destination Ontario](https://docs.google.com/forms/d/e/1FAIpQLScKFv0w0rI5-M993TGqN_i0MsqrPizHB8I5gNO6WWEKgd6Qng/viewform) listing  | I have \_\_\_\_ I will \_\_\_\_\_\_\_ (check one) |
| [Sign up](http://rto7.ca/Public/Special-Pages/Mailing-List-Signup) for the RTO7 E-Newsletter (funding updates, announcements, etc.).  | I have \_\_\_\_ I will \_\_\_\_\_\_ (check one) |
| Display the ‘BruceGreySimcoe Always in Season’ [(](http://rto7.ca/Documents/Public/Partnership-Funding-Projects/ON_POS_LOGO_RGB-1)[PDF](http://rto7.ca/Documents/Public/Partnership-Funding-Projects/ON_POS_LOGO_CMYK-1), [EPS](http://rto7.ca/Documents/Public/Partnership-Funding-Projects/ON_POS_LOGO_CMYK)) and Ontario ([JPG](http://rto7.ca/Public/Files/Brand-Assets/BGS-Logo-with-Tagline/BGS_Logo_AlwaysInSeason_CMYK-1.aspx), [EPS](http://rto7.ca/Public/Files/Brand-Assets/BGS-Logo-with-Tagline/BGS_Logo_AlwaysInSeason_CMYK.aspx)) logos on your website. Include an active link to [www.brucegreysimcoe.com](http://www.brucegreysimcoe.com). This could be in a footer, or on a ‘Things to Do in the Area’ type page or a ‘Sponsors/Partners’ type page | I do \_\_\_\_ I will \_\_\_\_\_\_ (check one) |
| At least one representative of the partners’ organization will complete the FREE online [BruceGreySimcoe Tourism Service Excellence training OR Typsy’s Interacting with Guests](https://rto7.ca/Public/Programs/BruceGreySimcoe-Free-Training)   | \_\_\_ I have \_\_\_ I will complete one of these trainings within 30 days |

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ do hereby certify that all information provided is accurate to the best of my knowledge and that the expenses claimed for have been/will be used only once to access RTO7 programming.  I further certify that the expenses claimed for have not been/will not be reimbursed by any level of government or government agency.  If I AM claiming for an expense that has been reimbursed in part by any level of government or government agency, I have disclosed below the percentage and amount that has been/will be reimbursed and understand that RTO7 will not allow/reimburse this portion of the expense. I understand that providing false information to Regional Tourism Organization 7 may result in the reimbursement in full of all funds provided by Regional Tourism Organization 7 and may preclude my business from participating in any current and future funding programs with Regional Tourism Organization 7.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Signature:  I am authorized to bind the organization

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:

To be completed IF you are claiming an expense that has already been partially reimbursed through other means:

Expense (as they may be claiming for multiple expenses):

Total Expense amount:

Amount of expense reimbursed/to be reimbursed through other means:

Amount of expense remaining to be claimed for this application:

Date:

Please email your completed application and Electronic Funds Transfer Consent Form below to Alex Hogan at ahogan@rto7.ca

**Electronic Funds Transfer** (Direct Deposit) **Consent Form**

Regional Tourism Organization 7 uses an electronic commerce and environmentally friendly solution to streamline the procurement process, improve service levels and provide convenient payment to our vendors and partners.

Please complete all of the form **AND attach a VOID cheque**.

**Part One – Remittance Information**

Company/Individual Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company/Individual Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(not applicable to individuals)

Title/Phone # with extension: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(deposit notification sent here)

I hereby consent and give Regional Tourism Organization 7 the authorization to use the attached banking information to process electronic payments directly to my bank account through the use of Electronic Funds Transfer. I understand the information will be kept confidential and not used for any other purpose.

I also agree to update Regional Tourism Organization 7 directly should any banking or email information change.

Print Name:

Authorized Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Part Two – Payment Information**

Accuracy requires an attached void cheque (photocopy acceptable) or banking remittance form. If you cannot provide one of these two, please help us avoid having to hold up everyone’s payments by double checking that the information you have provided is **accurate** – i.e. no numbers transposed or confusion of transit numbers and financial institution numbers. Thank you!

Financial Institution

Name:

Address:

Bank Account Information (CAD):

Branch transit numbers are always 5 digits long and financial institution numbers are always 3 digits long. Bank account numbers may be up to 12 digits long. Below is an example of a cheque:

 