



TourWest - TourWest Standard 2020
WESTAF (Western States Arts Federation)
Application #TW20200002

Primary Contact: Chrissy Deal
Phone: (303) 629-1166
Email: chrissy.deal@westaf.org
Document Generated: Tuesday, January 7th 2020, 9:19 pm

Applicant Profile

Applicant Type	Organization
Legal Name	WESTAF (Western States Arts Federation)
Address	1888 Sherman Street Suite 375 Denver, Colorado 80203 UNITED STATES
Telephone	(303) 629-1166
Primary Contact	Chrissy Deal
	Phone: (303) 629-1166 Email: chrissy.deal@westaf.org
Applicant Status	Organization - Non-Profit
Applicant Institution	None of the above
Applicant Discipline	Multidisciplinary
Congressional District	0
State House District	0
State Senate District	0
FEIN / TAX ID	11-1111111
Date Organization Formed	00/00/0000
Fiscal Year Ends Date	/
DUNS Number	000000000
Web Address	

Mission Statement

Organization History



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Performance Grant Application Questions

Presenter Information

What is the "popular" name of your organization?

When did your organization officially begin its operations?

Number of paid, full-time staff

Number of paid, part-time staff

Number of volunteers

Please upload 1 copy of proof of nonprofit, tax exempt 501(c)(3) status, or the equivalent, from the applicant's organization.

No File Uploaded

Provide a very brief summary of your project, including the outreach activity. For example: two chamber music public performances and one K-12 lec/dem outreach.

Artist or Company Name

Performance start date

Performance end date

Performance facility/venue name and location

Number of seats in venue

What is the population size (in numbers) of the area that this program will serve?

Cities/States served by the project

Will this project be part of a series?

If yes, how many performances are in your series?

Please upload one document with the 3 years of your organization's presenting seasons from Last Year, Current Season, and Projected. The document you upload must be a .doc or PDF formatted file



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and contain all three presenting seasons, formatted in a typed list, within one document.

Do not upload season brochures.

No File Uploaded



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Project Data Questions

For this grant application, the information you submit needs to address the elements of this TourWest project, which must include at least one public performance and one outreach activity that is separate from the public performance. See Standard Performance Grants - Eligibility and Guidelines When submitting your proposed answers, the information you provide should encompass the project as defined above.

Please note for the questions that are asking about "Population Benefited By" you can select more than one criteria but holding your control or command key and clicking the selections you want.

Type of Activity

Project Discipline

Arts Education

NEA Primary Strategic Outcome

Total Adults Engaged In Person 0

Artists Directly Involved 0

Youth (under age 18) Engaged In Person 0

Populations Benefited by Race

Populations Benefited By Age

Populations Benefited By Distinct Groups

Project Descriptors

Amount Requested \$0



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Artist Information

Does the artist or ensemble self-identify as Indigenous?

((WAA definition) – Member or descendant of a Native American, Alaska Native or Native Hawaiian nation or community, including U.S.-based Native/First Peoples of Canada, Mexico, and U.S. Territories of American Samoa, Guam, Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands. This includes individuals without official tribal status who are members of Native communities, and tribal members or descendants not living in their homelands or home community. Must be a US citizen or permanent resident.)

If yes, please list tribe(s) or group(s) with which the artist/band is affiliated (if known).

Artist/Company Information

Artist or Company state or country

*(**To be eligible for a TourWest grant, the artist must reside and operate outside of the state of the presenter. All applicants are welcome to apply for grants supporting international artists.)*

Artist or Company Name

Artist or Company primary contact person

Artist or Company address

Artist or Company address

Artist or Company state

Artist or Company telephone

Artist or Company email

Artist or Company website address

Total number of years that Artist or Company has been touring

Upload any additional promotional materials to share with the panel.

(This is NOT your work sample. This is an upload for any brochures, e-version of printed promotional materials that you may have available.)

No File Uploaded



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Artist Contract

Upload 1 copy of the contract or cosigned letter of agreement with the company. This document must include artistic fee(s), engagement date(s), the location(s) and description(s) of performance(s), and all outreach activities planned. If an agreement or contract is not available at the time of the application deadline, you must provide a letter of intent from the artist or artist's management.

No File Uploaded

Management Information

Management Company Name

(if different from artist/company name)

Management primary contact person

Management city

Management state

Management country

Management telephone

Management email

Management website address



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Digital Sample Upload and Select

No Work Samples are assigned to this application.



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Project Budget

Do not include TourWest grant request in these figures. Budget totals do not need to balance exactly. Applicants must contract with and pay the artistic fees directly to the artist or artist's management. Please note: Projected earned revenues that are detailed in this TourWest project budget form must be collected and maintained within your presenting organization.

Fiscal Year	Previous	Current	Upcoming
Operating Income	0	0	0
Operating Expense	0	0	0

Project Expenses

Total artistic fees for this project	\$0
Total expenses for this project	\$0
Total In-kind for this project	\$0

Sources of Project Cash Income

A. Earned income	\$0
B. Contributed income	\$0
C. State arts agency income	\$0
D. Local government income	\$0
E. Other income (include applicant cash)	\$0
F. Total project cash income	\$0

Sources of Project Cash Expenses - Actual Cash Expenses

A. Artistic Fees	\$0
B. Production Costs (personnel, equip.)	\$0
C. Space rental	\$0
D. Marketing (publicity, etc.)	\$0
E. Other expense	\$0
F. Total project cash expense	\$0



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Project Narrative

1. Project Overview

Describe the proposed project, how it pertains to your organization's mission and the intended audiences and/or communities it is designed to serve. Include details of the public performance and educational outreach including dates, times, locations, venues, and audiences for both.

2. Underserved Communities

A major goal of TourWest is to ensure quality performing arts are reaching the most underserved communities in the Western region. "Underserved" refers to racially/ethnically/linguistically minoritized groups, those facing socio-economic and/or educational challenges, disability communities or communities that geographically isolated or have limited access to arts. In many cases, the underserved need will be a combination of the above. Please describe the underserved need in your community and how this project will deepen your organization's engagement with key audiences or communities.

3. Engagement & Collaboration

TourWest seeks to support the engagement of new audiences and as well as collaboration between the presenters, artists, agents, and communities. Have you collaborated with other presenters in your area to block book this performance? Describe how your organization has worked with the artist(s) and/or community partners in planning the project and organizing the educational outreach. How does the project support engagement between underserved communities and the performing art/artists? How will this collaboration influence the marketing and communication strategy for the project?

4. Block Booked

Is this artist block booked within the western region?

5. Artistic Merit

TourWest supports the presentation of high quality performing arts in communities throughout the Western region. Describe the artistic choice for this project, how the artist(s) were selected, and why they are worthy of public funding. Provide an overview of the artist(s)' background, artist(s)



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location, experience, and how they and/or their performance relates to your identified underserved communities. Indicate whether the artist(s) identify with an underserved group or art form.

6. Artist Location

Is the artist(s) based in the 13-state WESTAF region? (Alaska, Arizona, California, Colorado, Hawai'i, Idaho, Montana, Nevada, New Mexico, Oregon, Utah, Washington, Wyoming)

(Artists are not required to be from the western region and may be based anywhere in the US or internationally.)

7. Evaluation

What is your organization's plan for measuring and tracking the success of the proposed project? What indicators will be most useful in determining impact?

Additional Supplemental Materials

Additional Supplemental Materials

(Please upload any additional materials you would like to submit. For example, you may submit a copy of the educational curriculum or study guide that is related to the project.)

No File Uploaded

Additional Supplemental Materials Description

Optional Demographic Information

WESTAF operates on guiding principles centered on artists, culture bearers, historically marginalized communities, identity, and place. These values inform our work and our commitment to be inclusive and accessible to our constituents. For this reason, we invite applicants to provide demographic information to help clarify and eventually assess WESTAF's equity and inclusion goals for the TourWest grant program. This question is OPTIONAL.

Does your organization's mission state a specific focus on historically marginalized and under-resourced communities? (select all that apply)

Communities of color (Black/African American, Latinx, Asian, Pacific Islander, Middle Eastern, Native American, and multi-ethnic)

People who identify as living with physical, intellectual, and developmental disabilities

Low-income communities



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- People who identify as LGBTQIA+
- None of the above
- Decline to state
- Other (describe below)



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Certification Page

WESTAF's TourWest program is made possible by the grant from National Endowment for the Arts, a federal agency. Grant recipients are required to comply with the federal policies and legal requirements, statutes, and regulations as stated in the following documents:

- TourWest Specific Terms and Conditions
Click here to review the terms of the agreement between WESTAF and TourWest grantees.
- Appendix A: Assurance of Compliance
Click here to review the Assurance of Compliance
- Appendix B: General Terms and Conditions
Click here to review the General Terms and Conditions

By submitting a TourWest application, the applicant assures and certifies that it is in compliance with the statutes outlined in Appendix A and all related WESTAF/National Endowment for the Arts regulations and will maintain records and submit reports necessary to determine compliance. The applicant further assures and certifies that all subrecipients of WESTAF/Endowment funds are in compliance with these nondiscrimination requirements and that it will obtain assurances of compliance from all subrecipients. WESTAF may conduct a review of the applicant organization to ensure that it is in compliance. If WESTAF determines that a grantee has failed to comply with these statutes, it may suspend, terminate, and/or recover funds awarded. This assurance is subject to judicial enforcement.

Applicant has reviewed TourWest Specific Terms & Conditions

Applicant has reviewed the Assurance of Compliance.

Applicant has reviewed General Terms and Conditions.

Applicant has a completed Section 504 Self Evaluation or equivalent documentation on file in your records for your organization? Or does the venue you are using have 504 ADA compliance documentation?

If not, you will need to have one completed if you are awarded this grant.

I certify that the information provided in this TourWest application is true and correct to the best of



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my knowledge and that the applicant organization will adhere to the assurance of compliance, general terms and conditions and federal regulations for this grant opportunity.

Applicant Name (Presenter Organization Name)