



# KANKAKEE COUNTY

TEAMWORK MAKES THE DREAM WORK



## Help us, help you.

Visit Kankakee County is an engaged destination marketing organization partnering with the area's visitor industry and communities in mutually effective marketing, sales productivity and tourism development support.

To request product from Visit Kankakee County as a supplement to your other program resources, please submit your completed application. All applications will be reviewed by a committee and consideration will be given to events or causes that foster tourism.

Only complete applications will be reviewed and product will be distributed as available.

### OUR MISSION

Our mission is to market and develop branded Kankakee County destination experiences to enhance community economic growth and quality of life.

### ABOUT US

The Kankakee County Convention & Visitors Bureau, Inc. was founded in 1983 as a 501 (c) 6 not-for-profit association to promote and champion Kankakee County as an overnight visitor destination. Today, the CVB has grown to include 22 communities and boasts close to 1,000 hotel rooms & hundreds of entertainment, dining, shopping, retail and cultural attractions for visitors to enjoy and experience.

### CONTACT

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FACEBOOK: [visitkankakeecounty](https://www.facebook.com/visitkankakeecounty)

INSTAGRAM: [@visitkankakeecounty](https://www.instagram.com/visitkankakeecounty)

TWITTER: [@VisitKankakeeCo](https://twitter.com/VisitKankakeeCo)





# Tell us your story.

Name of organization: \_\_\_\_\_

Does your organization hold 501 (c) 3 not-for-profit status? Y N

*If yes, please provide federal acknowledgment letter.*

Contact person: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Website: \_\_\_\_\_

Facebook: \_\_\_\_\_

Statement declaring the purpose of your organization: \_\_\_\_\_

Number of Kankakee County residents utilizing the event/service: \_\_\_\_\_

Number of NON-Kankakee County residents utilizing the event/service: \_\_\_\_\_

Age group of participants, not including those running the program (*circle all that apply*):

Under 10 yrs      10-15 yrs      15-18 yrs      Adult      Senior Adult (60+)

Event date: \_\_\_\_\_ Event venue: \_\_\_\_\_

Will guests be staying overnight? Y N      Will you need a block of rooms? Y N

*If yes:* # of rooms \_\_\_\_\_ # of hotel nights \_\_\_\_\_      Require (*circle one*): full service      limited service

Product requested (*circle all*): visitor's guide    church guide    welcome bags    map    product

Other, please describe \_\_\_\_\_

Quantity requested, but not guaranteed: \_\_\_\_\_ Requested date of distribution: \_\_\_\_\_

Intended use for requested donation: \_\_\_\_\_

**Product pick up verification:**

\_\_\_\_\_  
Print name    Signature    Date

**Internal use only:**

Request received by: \_\_\_\_\_

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

Fulfillment completed by: \_\_\_\_\_

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

LTCB reporting by: \_\_\_\_\_

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