**Capital One Community Arts Partnership Application Preview**

**THIS IS NOT THE OFFICIAL APPLICATION. APPLICATION MUST BE SUBMITTED ONLINE.**

**TO SUBMIT AN APPLICATION VISIT http://artsfairfax.submittable.com/submit**

Applicant Information

Organization Name

Mailing Address

Floor/Suite/Apt.

City

State

Zip Code

Is this mailing address the same as your street address? If not, please complete the following fields for your physical location.

What is the Magisterial District for your address of record (physical location)?

Refer to VA Form 102 and

verify at https://www.fairfaxcounty.gov/myneighborhood/

Phone Number

Website

Contact Name

Contact Title

Contact Email

Contact Phone Number

Chief Administrator Name

Chief Administrator Title

Chief Administrator Email

Chief Administrator Phone Number

Chairman, Board of Directors Name

Chairman's Email

Chairman's Phone Number

Which category best describes your organization?

* Fairfax County 501(c)(3) Arts Organization
* Fairfax County Government Agency Arts Related Program
* Fairfax County Public Schools Arts Related Program

Upload Required Eligibility Documents for verification:

Non-profit arts organizations are required to upload the following:

1. IRS Determination Letter required for 501(c)(3) organizations

2. Most recent IRS Form 990 (without schedules) required for 501(c)(3) organizations

3. Virginia Form 102 annual remittance form for non-profit organizations required for 501(c)(3) organizations.

Which category best describes the primary activity of your organization?

How did you hear about the opportunity?

Describe the applicant organization’s mission and community impact.

Describe your Performance History

For each space requested describe the proposed programming including expected audience, estimated number of participating artists, and indicate first, second, and third choice dates.

Space(s) requested (Main Hall/Vault/Classrooms)

Expected audience for event

How do you plan to market and advertise the program to meet the expected attendance goal?

Estimated number of participating artists

Describe the proposed programming in the theater(s)

* Please include date, theatre (Main/Vault), performance/rehearsal, program description, and technical requests. Examples: 11/12/23, Main Theatre, performance, Contemporary Dance Recital with sets and Marley flooring; 11/12/23, Vault, rehearsal, area for dancers to warm up and prepare for performance with Marley flooring and ability to play tracks
* The applicant organization must be the primary presenter/producer/promoter of the proposed program.
* Identify guest artists and collaborating organizations and clearly define their role(s).
* The program must feature an arts performance in either the Main Theater or the Vault.

Submission

Contact Name

Contact Title

Board Chair or Chief Administrator Name

Board Chair or Chief Administrator Title

Date of Submission

**THIS IS NOT THE OFFICIAL APPLICATION. APPLICATION MUST BE SUBMITTED ONLINE.**

**TO SUBMIT AN APPLICATION VISIT http://artsfairfax.submittable.com/submit**