

Laois County Council

Comhairle Chontae Laoise

**Culture Night in Laois 2025**

**EXPRESSION OF INTEREST**

**APPLICATION FORM**

Applications may undergo a selection and assessment process, having regard to the volume of applications received and the level of funding available. It may not be possible to offer funding to all applicants and it may also not be possible to offer the full amount requested to any individual applicant. It is therefore important to ensure that all relevant information is included in your application, including the proposed budget for the event.

**Contact Details:**

**Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Artists please include current CV with this application)

**Name of Group** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Phone:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Email:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Activity of Organisation or Individual. Tick as many boxes as appropriate**

|  |  |  |  |
| --- | --- | --- | --- |
| **Activity of Organisation or individual** | **Please tick** | **Activity of Organisation or individual** | **Please tick** |
| Visual Arts |  | Community Arts Organisation |  |
| Music |  | Choral Society |  |
| Literature |  | Theatre Group |  |
| Dance |  | Musical Society |  |
| Drama |  | Festival |  |
| Education |  | Club/Group |  |
| Traditional Arts |  | Youth Arts |  |
| Film/Video |  |  |  |

**Please indicate by ticking the box which category you/your organisation comes under:**

Voluntary/Local Community Arts Professional Arts Non-Professional Arts

**Participation in previous culture night events**  **YES NO**

**If YES: A brief description of the previous project and what year.**

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

**Funding received from Laois County Council in the last 2 years** **YES NO**

**If YES: Please give a brief description of funding received previously.**

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**Outline of Proposed Project for Culture Night 2025**

|  |  |
| --- | --- |
| **Details Expenditure on projected project** | **Amount** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

**Funding Request \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Total Amount Requested**

**Details of other Income available**

|  |  |  |
| --- | --- | --- |
| Is your organisation registered with Laois PPN?  *(if answer is ‘no’ here please undertake to join. To do so please contact Dan on 057 8665661 or email ppn@laoiscoco.ie.)* |  |  |

**Freedom of information**

Applicants completing this form should note that information provided to the Arts Office, Laois County Council may be disclosed in response to a request made under the Freedom of Information Act (1997 and 2003). Every effort will be made to protect client confidentiality.

**General Information**

Where did you hear about this award? (please tick to indicate)

Laois County Council Website Media

By Post from Arts Office Other

Please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**This application form should be returned, addressed as follows:**

**Culture Night Proposal 2025, The Arts Office, Laois County Council, Áras an Chontae, Portlaoise, Co Laois.**

**Or emailed to** [**arts@laoiscoco.ie**](mailto:arts@laoiscoco.ie)

**Closing Date: 28th February 2025**