

2020 GUIDELINES

Artist Contract Matching Grant



DESCRIPTION

The Artist Contract is a (2:1) matching dollar grant of **up to \$500** to eligible nonprofit organizations to contract an artist with a disability to perform, exhibit, design, or produce a public arts event.

Key Features:

- Deadline for submission is **March 15, 2020**
- Application is for events that have not occurred
- The activities period is from July 1, 2020 – June 30, 2021
- Applicant may apply only to one (1) Incentive Grant per grant period
- Event must reflect the Arts & Access Always mission and goals
- Applicant eligibility requirements differ per Incentive Grant

APPLICANT ELIGIBILITY

- Applicants must be a member of the Lehigh Valley Arts Council.
- Applicants must be a cultural nonprofit operating in the Lehigh Valley.
- Applicants must commit to providing customer service training to box office staff and volunteers from a human service organization that works with the disability community you are attempting to reach.
- Applicant must submit a complete application.

FUNDING PROCESS

- Applications are submitted electronically through email to rforte@LVArtsCouncil.org or in person to 840 Hamilton Street, Suite 201, Allentown, PA 18101.
- The Arts Council's staff reviews all applications and will notify applicant by May 2020.
- Grants are distributed once the required customer service training has been completed and received by the Arts Council.
- Grant recipients are required to submit an evaluation form and a customer satisfaction survey within one month of their event's completion.



ABOUT ARTS & ACCESS ALWAYS

In March 2017, the Board of Directors of the Lehigh Valley Arts Council adopted the following vision statement: "To be the leader of arts advocacy in the Lehigh Valley and ensure access to the arts for people of all abilities. Within that spirit of greater inclusion, the Arts Council is offering three **Incentive Grants for Greater Inclusion** to cultural nonprofits to encourage adopting cultural access as a core value of their organization.

2020 APPLICATION

Artist Contract Matching Grant

Grant Request Amount:
\$ _____

APPLICANT INFORMATION

Applying Organization: _____
Address: _____
Contact Person: _____ Phone: _____
Job Title: _____ Email: _____

EVENT INFORMATION

Event Title: _____ Date: _____
Type of Event:
 A performance or exhibition of work created and/or performed by artist(s) with a disability.
 An open captioned (OC) and/or an audio described (AD) performance or exhibition.
 An American Sign Language (ASL) performance or event.
 A performance or exhibition of work presented in a sensory-friendly environment for people with autism.
 Other (Please specify) _____
Brief Event Description: _____

AUDIENCE INFORMATION

Identify the audience you are targeting / community of people living with a disability:
 People with Cognitive Limitations *Please elaborate:* _____
 People with Physical Limitations _____
 People with Sensory Limitations _____
Have you identified which human service organization will help you to produce this project? Yes No
▪ *If yes, please elaborate:* _____

ARTIST INFORMATION

Name of Artist Contracting: _____
Artistic Specialties(s): _____
Phone: _____ Email: _____

NARRATIVE RESPONSES

Please attach separate page(s) for responding to the following five questions.

1. Where did the genesis for this event arise?
2. Is this the first time you're hiring an artist with a disability and/or providing accommodations to this audience? Please describe in detail the accommodation planned for this event to make it more accessible for your target audience and persons with disabilities.
3. How will you promote this event and ensure attendance from your target audience?
4. How will you evaluate the outcomes of the event? What metrics will you use?
5. Please explain how this award will help to build your capacity to provide continued access in the future?

BUDGET

Please complete the following budget by identifying the matching income source(s) and all the ways the grant award will be used.

INCOME	
Item / Source	Amount
Artist Contract Matching Grant / Lehigh Valley Arts Council	
TOTAL	
EXPENSES	
Item	Amount
TOTAL	

CHECKLIST OF REQUIRED INFORMATION

Please make sure to include all four items listed below with your submission.

- Completed information for applicant, event, audience, and artist
- Completed Narrative Responses on attached page(s)
- Completed budget including a 2:1 cash match of funds requested
- Credentials of Contracting Artist(s) and Administrators Resume

Complete your application for an Artist Contract Matching Grant by signing below and delivering this application along with all required materials to the Arts Council's office listed at the bottom of this page.

Applicant's Printed Name

Date

Applicant's Signature

**Lehigh Valley Arts Council
840 Hamilton Street, Suite 201, Allentown, PA 18101**