Tourism Development Grant Application Form 2025/26

This program provides financial support for projects that develop new or enhance existing tourism products. Projects must contribute to the core Manitoba tourism experience, a unique blend of cultural and nature-based attractions and travel experiences.



Important Documents

Program Guidelines (link) Budget Form (link)

Application packages must be received before the deadline to be considered for the current intake.

Submission deadline	Funding notification date	Final Report Due	
September 30th, 2025	October 24th, 2025	December 31st, 2026	
February 27th, 2026	March 31st, 2026	March 31st, 2027	

Application Steps:

Review the Program Guidelines to ensure your organization and project idea fit.
Start gathering the information needed to complete the funding application.
Contact the organizations below to discuss project scope and eligibility.
Fill out the application form.
Fill out the required budget.
Send the application before the deadline to:
Interlake Tourism Association
Tourism Development Grant 2025/26
ATTN: Dee King
admin@interlaketourism.com

Mailing Address: PO BOX 149 Grosse Isle, Manitoba ROC 1G0

Organizations to Connect with on Eligibility

Community Futures West Interlake lana@westinterlake.com	Community Futures East Interlake tdziadek@eastinterlake.com	Red River North Region admin@interlaketourism.com
1-888-496-8932 BOX 68, Ashern, MB ROC 0E0	1-800-378-5106 62 - 2nd Avenue, Gimli, MB ROC 1B0	204-322-5378 Box 149 Grosse Isle, MB ROC 1G0
Regional Map	Regional Map	Regional Map

- Please review the Guidelines form before completing the application.
- If you do not consult with the ITA, Community Futures East or West, before submission, this will affect your chances of receiving this funding.
- This grant is intended for NEW experiences or products only; it is NOT an enhancement grant.
- The Phase 2 Form will be delivered to successful applicants.
- The personal information collected by ITA or its administrative partners is required for program administration. The information will not be disclosed to any other third parties except as allowed by the Freedom of Information & Privacy Act.
- All fields below are *required* to be completed for applicant consideration.

How did you hear about the Tourism Development Fund?

☐ Interlake Tourism Association Website
☐ Social Media
☐ Newsletter
☐ Word of Mouth
☐ Interlake Tourism Association Member
☐ Other:

Organization and Project Information

	Name of Project:
	Location of Project:
	Date (event date or project timeline):
,	Name of Organization:
	Contact Person:
	Contact Phone:
	Contact Email:
T	he Applicant confirms that by completing this application:
	 They consulted with a program administration partner as outlined in the Program Guidelines. Their project is considered eligible. They are a current member in good standing of the Interlake Tourism Association or have applied to become a member. They have read the Application Guidelines.

Application Type:
Check all appropriate
 □ Culture and heritage □ Indigenous tourism sector □ Trail-based and nature-based outdoor recreation □ Agri-tourism and culinary tourism □ Winter and shoulder season tourism
Will this project move forward without the financial support from the ITA Tourism Development Grant?
□ Yes
□ No
A brief description of your primary visitor experience currently provided by your
organization/attraction and the proposed project, product or event:

Select the category that best meets your project status:			
□ Once			
☐ Recurring			
☐ First of what hopes to be recurring			
□ Other:			
If funds are awarded, how will you recognize the ITA as a	supporter?		
	.		
How much funding are you requesting?	\$		
What is the total project expenditure budget?	\$		
Do you have matching funds in the amount you are requesting?	\$		

Marketing

etailed description of your marketing plan and other efforts made to draw urists to the area. Describe the target markets that your proposed project					
attract. (plus a	marketing plan	schedule cha	art if desired)		

Marketing Activity/Cost	Anticipated Date
	1

Economic Impact Explain the expected economic benefits for Manitoba's Interlake region and outline the steps that will be taken to achieve them.

Contribution to the Tourism Sector Describe how your project will support and strengthen the tourism industry in Manitoba's Interlake region.

Manitoba's Inte	erlake region.
Organizatio	n Experience
	evant experience and qualifications of the key team members
involved in this	

Budget and Evaluation Strategy

You must include a copy of the project budget (form provided on page 1)

Has a Tourism Development Fund application been submitted for this project or event in the past? (example: same event but previous year) \[\sum \text{Yes} \] \[\sum \text{No} \]						
Di	d the project or event receing the second se	ive funding in the pa	ast?			
List all other sources of funding you have secured or applied for in support of this project						
	Name of Program / Grant	Funds Requested	Status of application and how much funding was received (if applicable)			
		\$				
		\$				
		\$				
А [Any other funding					
-		\$				
		\$				
		\$				

Provide a detailed breakdown of your project's implementation plan and timeline. Ensure that your timeline aligns with the reporting deadlines outlined on page 1.

Activity	Anticipated Completion Date

Project Impact & Evaluation

Identify specific impact measures and evaluation methods for your project. Describe how you plan to assess its success, including how you will gather data related to one				
				or more of the following: improved visitor experience, increased visitation, higher tourism investment, and greater visitor spending.
Γ				

Community Support & Documentation Checklist

Ensure all required items are included with your completed application.

Please retain a copy of your application and all supporting documents for your records.

Application (this form)
Budget (form provided)
Letters/motions of support from all partners confirming contributions
\$150 + GST Interlake Tourism Association Membership Fee for applicants who are <i>NOT</i> current members (or \$75 + GST for Non-profits with under \$30,000 yearly revenue)
Copy of quote(s) for project costs
Letters of support from non-participating organizations in support of your project

Declaration

I/we agree that if the Interlake Tourism Association provides support for this application, I/we will comply with the program guidelines and with the following requirements: Any funds awarded under this application are to be used solely for the purposes specified in this application unless written permission has been obtained from the program administration partners to vary these purposes, and any funds not so used will be returned to the Interlake Tourism Association within 30 days of the agreed upon completion of the project as a debt due and owing to the Interlake Tourism Association.

The Applicant understands that the program administration partners may request supplemental details on project implementation, timelines, budget and evaluation after this application and that funding approvals will be subject to receipt of any supplemental details.

Print Name Authorizing Signing Authority	Position/Title
Email(s)	Phone(s)
Signature Authorizing Signing Authority	Date

Application Submission

Forward the complete application, including supporting documentation, before the deadline to:

Interlake Tourism Association
Tourism Development Grant 2025/26

ATTN: Dee King

admin@interlaketourism.com

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PO BOX 149
Grosse Isle, Manitoba
ROC 1G0