



Virginia American Revolution 250 Commission (VA250)
VA250 Mobile Museum Experience, "Out of Many, One"

Applications for tour stops in 2025 are due December 1, 2024. Applications received after the deadline will be accommodated, when possible, with remaining available dates. Event dates are not considered final until a Host Services Agreement is signed, which will be sent upon approval of this application. "Hosting organization" means a museum, college or university, state or federal park, organizer of a fair or festival, state or local government organization, or other site at which the VA250 Mobile Museum Experience will be located.

County/City of: _____

I. Requested Mobile Museum Experience Tour Dates (List in order of preference)

First Choice

Please attach additional pages as appropriate: event/organization brochures, media articles, photos, plan outline, location site map, permit information.

Event Dates: _____

Times: _____

(May not exceed 8 hours per event day, which can be scheduled any time between 8 AM and 9 PM)

Event Name: _____

Physical Address: _____

Description of Event: _____

Website of Event or Hosting Organization: _____

Projected Number of Attendees: _____

Number of Times Event has Previously Occurred: _____

Secondary Activities Occurring in Conjunction with Event: _____

Special permits and other requirements associated with this location or event(s): _____

Plan for proposed location and site set-up for Mobile Museum: _____

Second Choice

Please attach additional pages as appropriate: event/organization brochures, media articles, photos, plan outline, location site map, permit information.

Event Dates: _____

Times: _____

(May not exceed 8 hours per event day, which can be scheduled any time between 8AM and 9PM)

Event Name: _____

Physical Address: _____

Description of Event: _____

Website of Event or Hosting Organization: _____

Projected Number of Attendees: _____

Number of Times Event has Previously Occurred: _____

Secondary Activities Occurring in Conjunction with Event: _____

Special permits and other requirements associated with this location or event(s): _____

Plan for proposed location and site set-up for Mobile Museum Experience: _____

Third Choice

Please attach additional pages as appropriate: event/organization brochures, media articles, photos, plan outline, location site map, permit information.

Event Dates: _____

Times: _____

(May not exceed 8 hours per event day, which can be scheduled any time between 8AM and 9PM)

Event Name: _____

Physical Address: _____

Description of Event: _____

Website of Event or Hosting Organization: _____

Projected Number of Attendees: _____

Number of Times Event has Previously Occurred: _____

Secondary Activities Occurring in Conjunction with Event: _____

Special permits and other requirements associated with this location or event(s): _____

Plan for proposed location and site set-up for Mobile Museum Experience: _____

II. Designated Contact

Designated contact *(Primary person who will coordinate the Mobile Museum Experience visit)*

Name: _____

Title: _____

Organization: _____

Address: _____

City: _____

State: _____

Zip: _____

Phone: _____

Mobile: _____

Email: _____

Alternate contact *(In the event that the designated contact is unavailable)*

Name: _____

Title: _____

Organization: _____

Address: _____

City: _____

State: _____

Zip: _____

Phone: _____

Mobile: _____

Email: _____

III. Endorsement by Local 250th Committee *(Optional)*

Chairman of the local 250th committee or person designated to act on its behalf.

Name: _____

Title: _____

Organization: _____

LOCAL 25TH COMMITTEE SIGNATURE: _____

COUNTY/CITY: _____

DATE: _____

IV. LOCAL GOVERNMENT APPROVAL *(REQUIRED FOR ALL APPLICANTS OTHER THAN COLLEGES/UNIVERSITIES OR STATE/FEDERAL PARKS)*

Local government employee or official authorized to act on behalf of the locality to schedule the Mobile Museum or approve its deployment in the locality.

Name: _____

Title: _____

Organization: _____

Address: _____

City: _____

State: _____

Zip: _____

Phone: _____

Email: _____

LOCAL GOVERNMENT SIGNATURE: _____

COUNTY/CITY: _____

DATE: _____

V. Authorization of Hosting Organization *(Required)*

Chief administrative official of the museum, college or university, state or federal park, fair or festival, or local government site serving as event location.

Name: _____

Title: _____

Organization: _____

Address: _____

City: _____

State: _____

Zip: _____

Phone: _____

Email: _____

Certification of Authorization: My signature below certifies that I am authorized by the hosting organization to schedule the VA250 Mobile Museum Experience and that, if this application is approved, I agree to provide the services listed in the Host Services Agreement (Part II of this application, herein incorporated and made part of this agreement), at no cost to the Virginia American Revolution 250 Commission.

HOSTING ORGANIZATION SIGNATURE: _____

DATE: _____

<p>Submit application to: Cheryl Wilson, Executive Director Virginia American Revolution 250 Commission 1001 East Broad Street, Suite 240 Richmond, VA 23219 Phone: (804) 967-3751 Email: cwilson@va250.virginia.gov</p>	<p><i>For office use only</i></p> <p><i>Date received:</i> _____</p> <p><i>Preliminary review:</i> _____</p> <p><i>Final action:</i> _____</p> <p><i>By:</i> _____</p> <p><i>Date:</i> _____</p>
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