

RESIDENTAL CONFERENCE AND ACCOMMODATION

CONTACT DETAILS
Company name
Key contact
Phone number
Email
PCO Association member number
PCO Association Certification
HOTEL CONTACT
Name of your national account manager
EVENT AND HISTORY
What is the event name?
What are the proposed dates for the event?
Are the dates flexible or 100% confirmed? Is the client willing to move dates if it allows for significant savings?
What is your relationship with ultimate client? (PCO, agent, committee member, event owner)
Is this confirmed business for the PCO? If not, please outline the request status.
Please name the event owner If known.
What is deadline for return of proposal?

How many times has	the event been run before?		
Year	Destination	Number of delegates	Room nights
What numbers are ex	spected for this conference?		
Did your firm manage	the event in the past? Yes	No	
What % of delegates	used the registration system to b	ook their accommodation?	
Percentage:			
DELEGATE INSIG	HTS		
	the conference unaccompanied?		
Percentage:			
Describe a typical del	egate?		
_	ning from? (If known i.e. internat		ests, are they from
major cities / regiona	l areas? What is the percentage	split?	
Describe typical deleg	gate spending pattern – e.g. fund	ed or unfunded to attend the me	eeting
THE BASIC'S			
What is the purpose of	of the event?		
What destinations are	e being considered?		
	-		

THE BASIC'S
Do all delegates have to stay on the one property? Yes No
What are the main venue considerations and limitations that need to be considered?
What are fundamental items which are expected by delegates at the event (e.g.; Wi-Fi, car parking, quiet rooms, hotel star rating)?
If a conference, how many days before the start of the event will the early bird deadline be?
If a conference, what percentage of registrations will take place in the early bird week? Percentage:
What catering is required? (Please append program or complete below outline if known)
Are there any other event requirements i.e. cocktail reception, gala dinner/event, transport, group activities etc?

What AV items are definitely required? (outline your expectations on equipment inclusions)
Will you need to bring in third party AV suppliers?
Is commission required on the Conference F & B or DDP component? If so, please provide detail.
ACCOMMODATION
Is a commissionable accommodation rate required? Yes No Percentage:
Accommodation types the PCO / Association are requesting proposals for (i.e. Luxury, budget, self-catering etc.)
What is the minimum block size required?
Outline the complimentary room and upgrade policies?
How many rooms will the client be buying for committee and speakers? Will you have a lead accommodation provider/Headquarter hotel, and if so, will you be able to confirm the rooms needed for VIP's, Association Board members, organizers / staff, or exhibitors at time of contracting? What are the requirements of the Headquarter hotel?
Are you using any other third-party methods to direct accommodation to the venue, and if so, describe?

Do you expect de generate commi	elegates who book directly with the hotel to be counted as part of the room block and to ssion?
Yes	No
Is booking accom the PCO?	nmodation with the PCO mandatory? If not, what will help increase direct bookings with
Do you allow ind	ividual guests to collect member reward points for their stay?
Shoulder date ac	ccess, same rate - required or not required?
Historically are n	nultiple types of accommodation offered to delegates, if yes, please describe.
POINTS OF DIF	FERENCE – INDICATE INTEREST
Will there be into	erest in pre and post extensions/tours?
Do you require a	site inspection?

REQUIREMENTS						
DAY	PLENARY MEETING ROOM REQUIREMENTS	BREAKOUT ROOM REQUIREMENTS	EXHIBITION REQUIREMENTS	IS AN OVERNIGHT HOLD REQUIRED?	SOCIAL EVENTS	DAILY CATERING REQUIREMENTS
EG.	i.e. 8am – 5pm 500pax Classroom Style	i.e. 3 breakouts 50pax per room Cabaret style	i.e. 30 x 3 x 2m booths	i.e. Yes	i.e. 6pm to 9pm 350pax Welcome Reception	i.e. DDP for 500pax To be served in Exhibition area
1						
2						
3						
4						
5						

ACCOMMODATION BLOCK						
Room Type	Day 1*	Day 2*	Day 3*	Day 4*	Day 5*	Day 6*

^{*}Please insert number of rooms required

This form was developed by PCOA accommodation subcommittee with the support of all our accommodation business partners.