BUSINESS EVENTS SUPPORT APPLICATION

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| --- | --- |
| **EVENT DETAILS** |  |
| **Event Name (type out name in full)** |  |
| **Proposed Dates** |  |
| **Number of Days** |  |
| **Number of Delegates** |  |
| **Number of Nights** |  |
| **Number of Delegates Checking-In** |  |
| **Event Status** | |  |  | | --- | --- | |  | Please tick all that are relevant | | Confirmed Event |  | | New enquiry – Request for Quotation for venue booking |  |   Please provide a background information on the history of this event.   |  | | --- | |  | |
| **Type of Event** | |  |  | | --- | --- | |  | Please tick all that are relevant | | Conference |  | | Congress |  | | Meeting |  | | Expo / Exhibition – Business to Business |  | | Incentive Group |  | | Workshop |  | |
| **Audience Profile** | |  |  | | --- | --- | |  | Please tick all that are relevant | | South African Only |  | | African / Regional |  | |
|  |  |
| **CLIENT DETAILS** |  |
| **Event Owner** | |  |  | | --- | --- | |  | Please tick all that are relevant | | University |  | | Association – Local |  | | Corporate – Local |  | | Third Party (PCO/DMC/etc) |  | | Other (Please specify) |  | |
| **Event Owner Name**  **(Organization / Institution / Corporate)** |  |
| **Client Contact Name and Surname** |  |
| **Client Title and Designation** |  |
| **Client Contact Details** | |  |  | | --- | --- | | Landline |  | | Mobile |  | | Email |  | | Website |  | |
| **Organization or Company Name**  **(Third Party – PCO / DMC etc.)** |  |
| **Point of Contact Name and Surname** |  |
| **Point of Contact Title and Designation** |  |
| **Point of Contact Details** | |  |  | | --- | --- | | Landline |  | | Mobile |  | | Email |  | | Website |  | |
|  |  |
| **EVALUATION CRITERIA** |  |
|  | |  |  |  | | --- | --- | --- | |  | **Yes** | **No** | | **ROTATION** |  |  | | A minimum of 20 in-person delegates (small event), |  |  | | A minimum of 50 in-person delegates (medium event), |  |  | | Business Event should be a minimum of two days of event |  |  | | Business Events should have a minimum of a one night stay for a minimum of 50% of your projected delegates numbers, |  |  | | Business Event must commence in 2022 / 2023, |  |  | | Does the Business Event shoulder a weekend (start on Monday or end on a Friday), |  |  | | Proof of venue hire and/or accommodation enquiry/reservation from the venue/accommodation establishment must be presented with the application |  |  | | **SECTOR INTEGRATION (for data collection purposes)** |  |  | | Is planned event aligned to any other Wesgro unit: |  |  | | * Trade |  |  | | * Investment |  |  | | * Film |  |  | | * Tourism |  |  | | * Air Access |  |  | | Is planned event aligned to any of the Western Cape’s economic priority sectors? |  |  | | * Medical and Pharma |  |  | | * Engineering |  |  | | * Agri-processing |  |  | | * Manufacturing |  |  | | * Renewable Energy |  |  | | * Oceans Economy |  |  | | * BPO, ICT & Technology |  |  | | * Creative Industries |  |  | | * Energy – Green Economy |  |  | | * Education |  |  | |
| **OTHER INFORMATION** |  |
|  | |  |  |  | | --- | --- | --- | |  | **Yes** | **No** | | Is a booking quotation or confirmation available and attached? |  |  | | Is the applicant registered on the Central supplier database?  If yes, please send us a copy of your valid certificate? |  |  | | Do you have a valid BEE clearance certificate?  If yes, please send us a copy of your valid certificate? |  |  | | Do you have a valid Tax clearance certificate?  If yes, please send us a copy of your valid certificate? |  |  | | **Have you received funding from Wesgro Unit?** |  |  | | **Have you applied or received funding from the South African National Convention Bureau (SANCB) / South African Tourism?** |  |  | |

***N.B Please note that funding needs to be applied for no later than 1 month before the event commences.***