

NOTICE OF WORKSHOP
CITY OF SOUTH PADRE ISLAND
CONVENTION AND VISITORS ADVISORY BOARD

NOTICE IS HEREBY GIVEN THAT THE CONVENTION AND VISITORS ADVISORY BOARD OF THE CITY OF SOUTH PADRE ISLAND, TEXAS WILL HOLD A WORKSHOP ON:

TUESDAY, FEBRUARY 17, 2015
11:00 A.M. AT THE MUNICIPAL BUILDING,
CITY COUNCIL CHAMBERS, 2ND FLOOR
4601 PADRE BOULEVARD, SOUTH PADRE ISLAND, TEXAS

1. Call to order.
2. Pledge of Allegiance.
3. **Public announcements and comments:** *This is an opportunity for citizens to speak to the Convention and Visitors Advisory Board relating to agenda or non-agenda items. Speakers are required to address the Convention and Visitors Advisory Board at the podium and give their name before addressing their concerns. (Note: State law will not permit the Advisory Board to discuss, debate or consider items that are not on the agenda. Citizen comments may be referred to Convention and Visitors Bureau staff or may be placed on the agenda of a future Convention and Visitors Bureau Advisory Board meeting).*
4. Discussion on Events Funding Application and Guidelines
5. Adjourn.

DATED THIS THE 13th DAY OF FEBRUARY 2015.


Susan M. Hill, City Secretary

I, THE UNDERSIGNED AUTHORITY, DO HEREBY CERTIFY THAT THE NOTICE OF MEETING OF THE GOVERNING BODY OF THE CITY OF SOUTH PADRE ISLAND, TEXAS IS A TRUE AND CORRECT COPY OF SAID NOTICE AND THAT I POSTED A TRUE AND CORRECT COPY OF SAID NOTICE ON THE BULLETIN BOARD AT THE CITY HALL/MUNICIPAL BUILDING ON **February 13, 2015**, AT/OR BEFORE **11:00 A.M.** AND REMAINED SO POSTED CONTINUOUSLY FOR AT LEAST 72 HOURS PRECEDING THE SCHEDULED TIME OF SAID MEETING.




Susan M. Hill, City Secretary

THERE MAY BE ONE OR MORE MEMBERS OF THE SOUTH PADRE ISLAND CITY COUNCIL ATTENDING THIS MEETING. AND IF SO, THIS STATEMENT SATISFIES THE REQUIREMENTS OF THE OPEN MEETINGS ACT.

SPECIAL EVENT FUNDING REQUEST Please attach the following:

- Basic Proposed Event Budget Marketing Summary (how, when, where will you market this event)
 Final income/expense (recurring events) Event summary Funding Request \$ _____

Organization _____ Date of Request MONTH/DAY/YEAR _____

Contact Name _____

Address _____

City: _____ State: _____ Zip: _____

Phone _____ Email _____

Event Title _____

Event/Proposed Date(s) _____

Location(s) of Event: Recurring Event ____ New Event ____

Estimated Attendance _____

Estimated Room Nights _____

Please list other (proposed) cash or in-kind sponsors. You may attach list.

_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____

Please present a plan for the following as it may pertain to your event (attach to application)

Event footprint (Submit a drawing defining parameters of event as it relates to streets, beach and/or bay)

Pedestrian & Parking Plan (Where will people park and how will they safely access your event)

*Proof of insurance may be required prior to processing check for funding

Thank you for your application!

**POST EVENT REPORT FORM
HOTEL OCCUPANCY TAX FUNDING**

Post Event Report Form

Date: _____

Organization Information

Name of Organization: _____

Address: _____

City, State, Zip: _____

Contact Name: _____ Contact Phone Number: _____

Contact Cell Phone Number: _____

Event Information

Name of Event or Project: _____

Date of Event or Project: _____

Primary Location of Event or Project: _____

Amount Requested: \$ _____

Amount Received: \$ _____

How were the tax funds used: (attach list of hotel tax funded expenses and receipts showing payment)

How many years have you held this Event or Program: _____

Event Funding Information

1. Actual percentage of funded event costs covered by hotel occupancy tax: _____
2. Actual percentage of facility costs covered by hotel occupancy tax (if applicable): _____
3. Actual percentage of staff costs covered by hotel occupancy tax (if applicable): _____
4. If staff costs were covered, estimate of actual hours staff spent on funded event: _____
5. Did the event charge admission? Was there a net profit from the event? If there was a net profit, what was the amount and how is it being used?

6. Please attach an actual Event Budget showing all revenues including sponsorships and all expenses.

Event Attendance Information

1. How many people did you predict would attend this event? (number submitted in application for hotel occupancy tax funds): _____
2. What would you estimate as the actual attendance at the event? _____
3. How many room nights did you estimate in your application would be generated by attendees of this event or program? _____
4. How many room nights do you estimate were actually generated by attendees of this event? _____
5. If this Event has been funded by hotel occupancy tax in the last three years, how many room nights were generated at South Padre Island hotels by attendees of this Event?

This Year _____
Last Year _____
Two Years Ago _____
Three Years Ago _____

6. What method did you use to determine the number of people who booked rooms at _____ South Padre Island hotels (e.g.; room block usage information, survey of hoteliers, total attendance formula, zipcode information, etc.)?

7. Was a room block established for this Event at an area hotel (hotels), and if so, did the room block fill? _____ If the room block did not fill, how many rooms were picked up? _____

Event Promotion Information

1. Please check all efforts your organization actually used to promote this Event and how much was actually spent in each category:

Newspaper: \$ _____
Radio: \$ _____
TV: \$ _____
Other Paid Advertising: \$ _____

Number of Press Releases to Media _____
Number Direct Mailings to out-of-town recipients _____

Other Promotions _____

2. Did you include a link to the CVB or other source on your promotional handouts and in your website for booking hotel nights during this event?

3. Did you negotiate a special rate or hotel/event package to attract overnight stays?

4. What new marketing initiatives did you utilize to promote hotel and convention activity for this Event?

5. Please attach samples of documents showing how _____ South Padre Island was recognized in your advertising/promotional campaign

6. Please attach at least one sample of all forms of advertising/promoting used in your campaign. If the sample itself does not indicate the medium (radio, TV, print, or mail) used or where the advertising took place (e.g. a city's newspaper, or a radio spot that does not indicate the city where the spot was played), please include other information that would show location of the advertising and medium utilized.

7. Please note any other success indicators of your event:

Sporting Related Events

1. If the Event funded by hotel occupancy tax was a sporting-related function/facility, how many individuals actually participated in this event? _____

2. If the event was a sporting-related function/facility, how many of the participants were from another city or county? _____

3. If the event was a sporting-related function/facility, quantify how the activity substantially increased economic activity at hotel within the city or its vicinity?

Additional Event Information

What _____ South Padre Island businesses did you utilize for food, supplies, materials, printing, etc?

Please Submit no later than (insert deadline) to:

 (fill in name, contact person, and address of your city or entity overseeing use of hotel tax)