EventOFFICE

Briefing Document - What to Supply

Name of Event:

Event Description:
This will be included in your event information section and may be as brief or as detailed as you wish.

Date:

Venue:

Address:

Ticket Price Excl GST:

Ticket pricing variations eg:
Early Bird Rates, Member Rates
Free of Charge, Bulk purchases
(Buy 10 get one free etc)

Booking Capacity:

On sale Date:
Registrations / tickets will be available for sale from this date

Close Date:
Registrations / tickets will be no longer be for sale from this date:

Please specify the message you would like to appear on the form once registrations have closed:

Preferred URL: www. eventoffice.com.au/

Event Map:
Do you wish to have an Event Map included on your guests' confirmation?   YES ☐   NO ☐

Outlook Calendar:
Do you want your guests to be able to automatically add your event to their Outlook Calendar? YES ☐ NO ☐

Message you would like included:

Event Masthead Graphics:
Please provide these at 760 pixels wide 150-250 pixel high in JPG, GIF or Tif format (RGB).

ABN Number:

Entity Name:

Entity Address:

Entity City:

Entity State:

Entity Postcode:

Entity Country:

Event Contact Details:
Name, address , telephone, email

Additional Information:
Please provide details for additional information required e.g. dietary requirements, disability access

Confirmation email:
Please provide copy for what you would like included in the confirmation email eg. Parking information

Parking information:

Will tickets be issued?	YES ☐	NO ☐
If no, do guests need to bring along their confirmation email to gain entry ?	YES ☐	NO ☐
Do you want your tickets issued electronically (via email?)	YES ☐	NO ☐

Terms and Conditions:
(Please specify your terms and conditions / cancellation / refund policy / transfer of tickets etc)

Privacy Policy:
*Please specify or provide a PDF / URL for
inclusion*

_____

Additional PDF downloads & links:

_____

Marketing Information
Would you like guests to have the option of being placed on your mailing / DM list?   YES ☐   NO ☐

Any other marketing related questions e.g. where did you hear about our event?

_____

Payment Processing:

How do you wish your payments to be processed *Charges apply*	By EventOFFICE: ☐	We will process payments: *Manually* ☐ *We would like EventOFFICE to establish an automated gateway for us* ☐ *We have an existing payment gateway which we would like integrated with our EventOFFICE system* ☐

Payments accepted:

May check as many options as you wish

_____

Credit Cards :
Visa / Mastercard: ☐
American Express: ☐
Diners Club: ☐

_____

Cheques : ☐
Specify cheque payable to:
Address to:

_____

Direct deposit: ☐
Specify BSB:
Account Number:
Account Name:

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