

# BUSINESS EVENTS INDUSTRY AOTEAROA (BEIA) BEIA PROFESSIONAL CONFERENCE ORGANISERS GROUP Application for BEIA Approved PCO Group Membership

Company/Organis	sation Name:	
	business is organising and managing conferences — a "conference ast 50 persons and run for 2 or more days".	
Name of "Qualifie	d Person":	
	Position Title:	
Address Details:	Postal:	
	Physical:	
Contact Details:	Phone: Mobile:	
	Email:	
	Website:	
	u been in business?ars' experience in organising and managing conferences is required)	
Are you linked dire	ectly or have membership to any other company or organisation?	
Main Activity of th	e Company:	
Secondary Activity	of the Company:	
How many confere	ences a year do you do?	
What is the average	ge length in days of each conference?	
What is the averag	ge attendance number at each conference?	
Why do you wish t	to join the BEIA Approved PCO Group? (You must be a current	
financial Member	of BEIA):	





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#### **Declaration:**

Applicant's Signature: .....

I have read the "Minimum Service Levels" document and comply with all criteria contained in that document. I confirm that I/we operate a computerised conference management system (please attach details of software package used).

I also confirm that I have read the **"Code of Ethics, Rules and Responsibilities"** pertaining to BEIA Approved PCO Group Membership, and if this application is successful, I/we agree to abide by all points in that document. I have also attached to my Application Form the relevant documents to detail that our company complies with the "Code of Ethics" document.

..... Date: .....

Please send all completed and signed documents, together with relevant supporting documents to:
BEIA, PO Box 331202, Takapuna, Auckland 0740
Or email to: admin@beia.co.nz
<u>Checklist:</u> □ Application for BEIA Approved PCO Group Membership – completed and signed
□ Minimum Service Levels – completed and signed
□ Code of Ethics, Rules & Responsibilities — completed and signed
□ Letter from your Bank confirming all Clients' Funds are held separately and are
protected (complying with "Code of Ethics" Clause 2)
□ Insurance Certificates – Public Liability; Professional Indemnity; & Cyber Cover
□ Sample of Client Contract (complying with "Code of Ethics" Clause 3)
□ Copy of an Event Risk Management Plan
□ Names of Referees plus 3 Written References, each signed by Referee
□ Details of Software Package used





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(BEIA wish to acknowledge IAPCO (International Association of Professional Congress Organisers) Guidelines from which some of this text has been extracted.)

### **Names of Referees:**

Conference 1: Event Name:
Dates Held:
Location:
Number of Delegates:
Name of Referee:
Contact Details (for checking purposes):
Conference 2: Event Name:
Dates Held:
Location:
Number of Delegates:
Name of Referee:
Contact Details (for checking purposes):
Conference 3: Event Name:
Dates Held:
Location:
Number of Delegates:
Name of Referee:
Contact Details (for checking purposes):

Please provide signed, written references for all three conferences.