



## 2020 INTERNATIONAL CONFERENCE - BID QUESTIONNAIRE

This questionnaire must be completed and submitted with your bid.  
 Bids submitted without the proper forms will be reject ted.  
 The deadline for submission is 5:00 p.m. Central Time on Friday, December 31<sup>st</sup>, 2018.

### AGENCY SUBMITTING BID

Fire Department or Organization Name:			
Point of Contact:			
Address:			
City, State, Zip:			
Phone:		Cell Phone:	
Email:		Website:	

### SPONSORING DEPARTMENT

Name of Sponsoring Department:			
Point of Contact:			
Email:		Cell Phone:	
Chief's Name:			
Address:			
City, State, Zip:			
Phone:		Cell Phone:	
Email:		Website:	
Mayor's Name:			
Do you have the Chief's support to host this conference?	<input type="checkbox"/> YES <input type="checkbox"/> NO		

Do you have the Mayor's support to host this conference?	<input type="checkbox"/> YES <input type="checkbox"/> NO
--	--

**DATES**

Primary dates being offered:	
Alternate dates being offered:	

**LOCAL COMMITTEE**

A committee of local firefighters is necessary for support prior to the conference as requested by the iWomen Conference Committee. It will also be necessary for this committee to work with iWomen staff and board members during the conference.

*This committee is on a voluntary basis – they will not receive pay from iWomen for their support.*

Will you be able to have a committee before and during the conference?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNSURE
--	--

**TRANSPORTATION**

Nearest airport:	
Airlines serving this airport:	

### HEADQUARTERS RESORT/HOTEL OPTION #1

Property Name:		
Manager's Name:		
Distance from airport to suggested hotel:		
Please list any restaurants or venues within walking distance (< 1 mile) of the hotel that can host 300+ guests. (Hotel bars/restaurants may be included.)		
1.		
2.		
3.		

### HEADQUARTERS RESORT/HOTEL OPTION #2

Property Name:		
Manager's Name:		
Distance from airport to suggested hotel:		
Please list any restaurants or venues within walking distance (< 1 mile) of the hotel that can host 300+ guests. (Hotel bars/restaurants may be included.)		
1.		
2.		
3.		

### HEADQUARTERS RESORT/HOTEL OPTION #3

Property Name:		
Manager's Name:		
Distance from airport to suggested hotel:		
Please list any restaurants or venues within walking distance (< 1 mile) of the hotel that can host 300+ guests. (Hotel bars/restaurants may be included.)		
1.		
2.		
3.		



**MISCELLANEOUS (Note: These are not required items – just helpful in planning.)**

Does your Department have an Honor Guard that would be available for the Opening Ceremony?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Does your Department have a Fire Chaplain that would be available for the invocation during the Opening Ceremony?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Would your Department, Union Local, or Volunteer Organization be willing to sponsor one of the evening events?	<input type="checkbox"/> YES <input type="checkbox"/> NO

**AUTHORIZED REPRESENTATIVE**

Signature	
Printed Name:	
Department or Company:	