



THE HAWAIIAN ISLANDS TRAVEL ASSISTANCE QUESTIONNAIRE - MAUI

Aloha!

Please complete the below questionnaire, and return it to **Jackie Smythe** via fax to **(808) 521-7163** or via email <u>Jackie.Smythe@AnthologyGroup.com</u>. This form is intended to give us a greater understanding of your story assignment(s) and preferences so we can make your experience on Maui productive and enjoyable.

<u>Important Note:</u> Due to the volume of requests, if you are submitting this questionnaire within six (6) weeks of your desired travel dates, your request may not be given full consideration. In working with our Island Chapters, members, and industry partners, MVCB/HVCB requires adequate time for evaluation and coordination of all travel logistics.

Mahalo!

PERSO	NAL INFORMATION	
* Asteris	k Denotes Mandatory Field	
1.	Name*:	
2.	Title:	
3.	Company:	
4.	Address 1*:	
5.	Address 2:	
6.	City*:	
7.	State*:	
8.	Zip/Postal code*:	
9.	Email*:	
10.	Phone number*:	
	Extension:	
12.	Mobile phone (schedule changes/emergencies)*:	
	a. Do you accept Texts?*	OYes ONo
13.	Will you be traveling with anyone?*	OYes ONo
are plan	/CB only provides travel assistance for qualified media or social mening to travel with a writing partner or photographer, he/she must	
-	rovide your travel partner's information so we may match up their Name: Relationship (e.g., writing partner, photographer?):	·
SECTIO	NS	

(hyperlinks to sections)

Websites and/or Blogs

- Social Media Influencer
- Broadcast Channels

The Travel Assistance Questionnaire includes four sections. Please complete all that apply to your specific request.

PRINT PUBLICATIONS

FIXIINI	FUBLICATIONS
-	re a journalist for a print publication, please complete all fields in this section. Any incomplete fields will delay in processing your request. Publication: Audience: Circulation: Demographic Profile: Date of Publication: Digital Version of Publication: Additional Outlets: Information about submitting sample works
WEDGIT	TES AND/OR BLOGS
WEDSII	ILS AND/OR BLOGS
fields wi	re a journalist representing websites and/or blogs, please complete all fields in this section. Any incomplete ill cause a delay in processing your request. Name of website/blog: URL of website/blog: On average, how many unique visitors does your website receive monthly? (e.g., unique visitors defined as the total traffic to a website counting each visitor only once within a monthly timeframe.) Is your site/section part of a larger network? (e.g., About.com). OYES No
5. 6.	If so, how many unique visitors does your site/section average a month? How do you attract visitors to your site?
7. 8. 9.	How would you classify your website? (e.g., consumer travel, budget, retail) If your site covers more than travel, what percentage of your site is specifically regarding travel? What tool do you use to track website visitation? (e.g., Google Analytics. Include screen grabs from the past three months.)
	Will your coverage include a link to gohawaii.com? How long will coverage of Hawai'i remain on your site?

12. Does the site/s have social media channels?

Instagram

Facebook
URL: _____Page Likes (as of submission date): ______

Twitter

URL: _____
Followers (as of submission date): ______

URL/handle: ______
Followers (as of submission date): ______

Pinterest
URL: _____
Followers (as of submission date): _____

YouTube
URL:

Subscribers (as of submission date):

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Google+
URL:
Followers (as of submission date):
13. List any awards received or recognition from a third party for your website or blog:

14. Additional blog or website:
15. Additional blog or website URL:

SOCIAL MEDIA INFLUENCER

If you are a social media influencer or represent personal media channels, please complete all fields in this section Any incomplete fields will cause a delay in processing your request.

1. Do you have a specific location or theme that you're planning to explore in your social posts?

omplete fields will cause a delay in processing you Do you have a specific location or theme that yo	
List any existing relationships with other travel of	lestinations, organizations, or brands.
What are your social media channels	
Facebook URL:	
Page Likes (as of submission date):	
Twitter	
URL:	
Followers (as of submission date):	
Instagram	
URL/handle:	
Followers (as of submission date):	-
<u>Pinterest</u>	
URL:	
Followers (as of submission date):	
<u>YouTube</u>	
URL:	
Subscribers (as of submission date):	
Google+	
URL:Followers (as of submission date):	
Other(s)	
URL: Community size (as of submission date):	
Other(s)	
URL:	
Community size (as of submission date):	-

BROADCAST CHANNELS

If you are a journalist for a broadcast program, please complete all fields in this section. Any incomplete fields will cause a delay in processing your request.

1.	Title (Please list all networks applicable):	
2.	Network/Station:	
3.	Length of Show (i.e.,1/2 hour, 1 hour):	
4.	Will Hawai'i be a whole episode or segment? _	
5.	If a segment, how long will it be?	
6.	Viewership per episode/show? (not household	l numbers) :
7.	Audience:	
8.	Demographic Profile:	
9.	Air Date:	
10.	Number of crew traveling to Hawai'i:	
11.	Will you be hiring local crew?	OYes ONG

SAMPLE WORKS

- 1. **Print journalists**, please email a link of the publication you are on assignment for, links to recently published travel stories, and a letter of assignment. If links aren't possible, please email PDFs.
- 2. **Broadcast productions**, please forward a link to the show/program being brought to Hawai'i and a letter of assignment. If a link isn't available, please send two DVD copies.

Please forward the above items to:

Jackie Smythe

Anthology Marketing Group 1003 Bishop Street, 9th Floor

Honolulu, HI 96813

T: (808) 539-3426

E: Jackie.Smythe@AnthologyGroup.com

TRAVEL ASSISTANCE REQUESTS

_		<u> </u>		ase provide your final flight itinerary
1. 2.	Dates o	ed Departure City/Airpo		Donarturo
۷.	Dates 0	Dates on Maui:		Departure: Departure:
	•	Dates on Moloka'i:		Departure:
	•	Dates on Lāna'i:		Departure:
3.			h hotel accommodations?	
	7C 7	Please list any special i	requests or requirements	Please note any accommodations that have hat you have directly contacted.
4.	Are you	seeking assistance with	activities? OYes ONo	
		Hawai'i cuisine, golf, ro	· · · · · · · · · · · · · · · · · · ·	o experience (soft adventure/ecotourism, xation/rejuvenation, women, family, ew, etc.
_				
5.	Are you	All normal driver quali	d. If applicable, please de	OYes ONO ing minimum age (25), a valid driver's license, note anything regarding your ability to drive a call
6.	Do you	Please note any specia	requests or comments? (Il requests or personal pro Il feel we should be aware	ferences not already addressed in this

TRAVEL COVERAGE AND ASSIGNMENT

1. Please i	, sidahar phatas ata	1.
	n, sidebar, photos, etc. Accommodations	Type of coverage:
	Activities	Type of coverage:
	Restaurants	Type of coverage:
_		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Please describe your	story assignment angle in detail:
•	which Island Chapter(s) Hawai'i Visitors an Kaua'i Visitors Bu O'ahu Visitors Bu	nd Convention Bureau reau reau
	☐ Moloka'i Visitors ☐ Lāna'i Visitors Bur	
	☐ Big Island Visitors	·
	in dig island visitors	Buileau
HVCB ASSISTA	NCE DISCLAIMER	
Advertising" effe	ctive December 1, 200	nission's "Guides Concerning the Use of Endorsement and Testimonials in 199. I understand and will make every effort to comply with FTC guidelines to sponsored and/or assisted by the Hawai'i Visitors and Convention Bureau.
Please initia	al to acknowledge the	above statement.
		receiving travel assistance to the Hawaiian Islands from the Hawai'i Visitors land Chapters) are required to complete a Waiver and Release Form.
Thank you for ta	king the time to compl	lete this questionnaire.
Mahalo, MVCB Media Tea	am	
For MAYCD Modi	Toom use only	
For MVCB Media Date Submitted	Team use only:	Date Approved