



San Diego Multicultural FAM Tour PLANNER PROFILE

Organizational Profile

Organization Name: _____ Total Number of Annual Programs: _____

Planner Name: _____ Total Number of Programs You Plan: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Ext: _____ Fax: _____ Email: _____

Meeting(s) that could be considered for San Diego

Meeting Name: _____ Next Open _____

West Coast: _____

Property type desired: Airport Convention Resort Other

Pattern: # of peak rooms _____ # of Room Nights: _____ # of Attendees: _____

Desired month(s): _____ Year: 2011 2012 2013 Other: _____

Desired Rate Range: _____

Key Decision Factors: _____

Name and contact of other individuals, within your firm, who plan meetings or incentives

<u>Contact Person</u>	<u>Name of Meeting</u>	<u>Tel/Fax/e-mail</u>
_____	_____	_____
_____	_____	_____

Last three destinations used:

<u>Month\Year</u>	<u>Number of peak rooms/rate</u>	<u>Number of room nights</u>	<u>Location/property</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Types of meeting planned

- Annual Convention
- Incentive
- Sales
- Board of Directors

- Training
- Trade Show
- Symposium/seminar
- Other

Additional comments to assist us in better understanding your needs as they relate to San Diego.

**MCCSN 2010 DESTINATION PROGRAM
September 16-19**

Yes, I am able to attend.

I am unable to attend; however, please consider me for MCCSN's future FAM Tours.

Please respond to:

Clara Carter, FAM Executive Producer
MCCSN 877-79MCCSN (62276) | 619-263-3111 fax
Email: clara@mccsn.com

Thank you for completing this Planner Profile

**Note: This program is for Meeting Planners and Executive Staff only.
No substitutes outside of the decision makers will be allowed to participate.**