



The APEX Post-Event Report Template

*Approved by the Convention Industry Council on October 30, 2003
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Report Section	Page Number
Instructions for Use	2
Event Information	4
Contact Information	6
Hotel Room Information	7
Room Block Information	8
Food & Beverage Information	9
Function Space Information	10
Exhibit Space Information	11
Future Event Dates Information	12
Report Distribution Tracking	13
Post-Event Report FAQ	14

INSTRUCTIONS FOR USE

1. A report of the details and activities of an event is called a “Post-Event Report” or PER. A collection of PERs over time will provide the complete history for an event.
2. A face-to-face post-event meeting should be scheduled between the primary event organizer (the main planning contact person) and each venue and facility involved in an event. That meeting should occur immediately following the end of the event and should focus on an evaluation of the success of the event as well as the completion of the Post-Event Report.
3. The report shall be completed by the primary event organizer of an event and filed with each venue and facility that was used for the event. Detailed recommendations for this process are included in the “Suggested Uses” section of the APEX Post-Event Report template.
4. The most recent PER for an event should accompany any request for proposals (RFP) sent to solicit proposals for future occurrences of that event.
5. In regard to the actual APEX Post-Event Report:
 - a. Some information in the APEX PER is required. Information must be included in these sections for the report to be considered complete. These items are designated within the template. While all items are not required, the more that are completed, the more valuable this report will be to the event organizer in the future.
 - b. All sections and items will not apply to every event. If a section or item does not apply, it should be left blank.
 - c. The APEX PER should be completed for events of all sizes, especially for those of 25 rooms on peak night and larger.
 - d. It is recommended that the primary event organizer for an event, in partnership with the event’s suppliers, complete all applicable sections of the report within 60 days of the end of that event.
 - e. Once complete, the primary event organizer should file a copy of the report with each entity, venue or facility that was used for the event (i.e., Convention & Visitors Bureau, Hotel, Conference Center, etc.). The event organizer should also file the report internally for future reference.
 - f. The “Comments” field in each section should be used for any information from the organizer, venue, facility, etc. that does not fit into one of the pre-established fields, but that provides insight or valuable information regarding the event.
6. There will be various stages in the evolution of the industry’s Post-Event Report and the processes used to complete it. The Convention Industry Council will remain actively involved in this evolution and will provide resources as needed:
 - a. Stage I – The form will be available as a word processing file that will be completed manually and will be filed by planners and suppliers in electronic and/or hard copy form.
 - b. Stage II – As industry-related software is updated and new software is developed, programmers will ensure that the APEX data map is referenced so that all data fields are defined correctly and are able to efficiently capture, store, and share historical information. This will allow for more automated completion of the report.
 - c. Stage III – When the industry determines that a central event history database is to be developed, this report and the resulting data map, will be the basis for the information collected by and stored in this database. At that time, the Convention Industry Council (CIC) will convene a special APEX panel to address the best practices and processes for the use of such a database.
7. The Convention Industry Council will hold the copyright to the APEX Post-Event Report template. However, members of the meetings, conventions and exhibitions industry are permitted to copy and/or reproduce the template, as permitted by applicable copyright law, provided such use of the APEX Post-Event Report template is for member services and educational purposes and not for commercial advantage or financial gain of any sort. All copies and/or reproductions of the APEX Post-Event Report template must include the following:

- a. the copyright notice of "Copyright © 2003 by Convention Industry Council"
- b. the date the information was copied or reproduced, and
- c. a reference line that reads: "Refer to the on-line version of this report, located at www.conventionindustry.org for the most up-to-date content."

Any other reproduction, duplication, copying, sale, resale or exploitation of the APEX Post-Event Report template, or any portion thereof, for any other purpose, without the express written consent of the Convention Industry Council, is expressly prohibited.

8. The Convention Industry Council will annually convene a special committee of professionals from across the meetings, conventions, and exhibitions industry to review all recommendations to the contents of the APEX Post-Event Report that have been received in the preceding year. This special committee will consult and confirm that changes to the report are required. It will then make a formal recommendation to the Convention Industry Council for action.
9. The APEX Technology Advisory Council (TAC) will complete its work of defining the data specifications that correspond to the fields of data that the APEX Post-Event Report intends to capture and share. Those data specifications will be included in the APEX Data Map and will be released for industry use by December 31, 2003.

SECTION I: EVENT INFORMATION

*Event Name: _____

*Event Organizer/Host: _____

*Event Location City: _____ *Event Location State/Province: _____

*Event Location Country: _____

*Published Event Start Date: _____ *Published Event End Date: _____

Event Organizer/Host Overview (*mission, philosophy, etc.*): _____

Event Objectives: _____

Event Web Address: _____

Event Type:	Drop Down Options: <ul style="list-style-type: none"><input type="checkbox"/> Board Meeting<input type="checkbox"/> City-Wide Convention<input type="checkbox"/> Committee Meeting<input type="checkbox"/> Customer Event<input type="checkbox"/> Educational Meeting<input type="checkbox"/> General Business Meeting<input type="checkbox"/> Incentive Travel<input type="checkbox"/> Local Employee Gathering<input type="checkbox"/> Product Launch<input type="checkbox"/> Public Show<input type="checkbox"/> Sales Meeting<input type="checkbox"/> Shareholders Meeting<input type="checkbox"/> Special Event<input type="checkbox"/> Team-Building Event<input type="checkbox"/> Trade Show<input type="checkbox"/> Training Meeting<input type="checkbox"/> Video Conference<input type="checkbox"/> Other: _____
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Event Frequency:	Drop Down Options: <ul style="list-style-type: none"><input type="checkbox"/> One Time Only<input type="checkbox"/> Bi-Annual<input type="checkbox"/> Annual<input type="checkbox"/> Semi-Annual<input type="checkbox"/> Quarterly<input type="checkbox"/> Monthly<input type="checkbox"/> Other: _____
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*Primary Event Facility Name (*the facility where most of the functions for the event were held*): _____

*Primary Event Facility Type:	Drop Down Options: <ul style="list-style-type: none"><input type="checkbox"/> Convention Center<input type="checkbox"/> Hotel<input type="checkbox"/> Conference Center<input type="checkbox"/> Other Venue
-------------------------------	--

Was an off-site venue(s) used? Yes/No

Original Expected Attendance: _____

Total Pre-Registered Attendance: _____

Total On-Site Registrations: _____

No-Shows: _____

Number of Exhibitors Attending: _____

*Actual Attendance (including exhibitors): _____

Number of Domestic Attendees (*Domestic Attendees live in the same country where the event is held*): _____

Percentage of Domestic Attendees (*AUTO CALC: "Number of Domestic Attendees" DIVIDED BY "Actual Attendance" MULTIPLIED BY 100 = _____%*): _____

Number of International Attendees: _____

Percentage of International Attendees (*AUTO CALC: "Number of International Attendees" DIVIDED BY "Actual Attendance" MULTIPLIED BY 100 = _____%*): _____

Was shuttle service provided for attendees? Yes/No

Did the event make use of a Destination Management Company (DMC) or Professional Congress Organizer (PCO)? Yes/No

Did the event offer guest tours/guest programs? Yes/No

If a recurring event, complete the following for the last time the event occurred:

Last Start Date: _____

Last End Date: _____

Last Primary Event Facility Name: _____

Last Event Location City: _____

Last Event Location State/Province: _____

Last Event Location Country: _____

Event Information Comments (*Use this space to note important information not captured by the report such as unusual circumstances that positively or negatively affected attendance*): _____

SECTION II: CONTACT INFORMATION

*Event Contact Type:	Drop Down Options: <input type="checkbox"/> Employee of Event Organizer/Host <input type="checkbox"/> Employee of Event Management Company <input type="checkbox"/> Employee of Association Management Company <input type="checkbox"/> Exhibit Manager <input type="checkbox"/> Independent/Third Party <input type="checkbox"/> Other: _____
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*Event Contact Role (<i>check all that apply</i>):	Drop Down Options: <input type="checkbox"/> Volunteer <input type="checkbox"/> Staff <input type="checkbox"/> Event Organizer (Planner) <input type="checkbox"/> Informational Contact <input type="checkbox"/> Other: _____
--	---

Contact Person:

Prefix (*e.g., Mr., Dr.*): _____ * Given Name: _____ *Middle Name: _____

*Surname Prefix (*e.g., Mac, Vander*): _____ *Surname: _____

Suffix (*e.g., Jr., Sr.*): _____ NameTitle (*e.g., CPA, Ph.D.*): _____

*Preferred Name: _____

*Job Title: _____ *Employer: _____

*Mailing Address Line 1: _____ Mailing Address Line 2: _____

*City: _____ *State/Province: _____

*Postal/Zip Code: _____ *Country: _____

*Phone: _____ Mobile Phone: _____

Fax: _____ Email: _____ Web Address: _____

Repeat for additional contacts as necessary

SECTION III: HOTEL ROOM INFORMATION

*Did the event utilize sleeping rooms? Yes/No

If No, go to Section V. If Yes, complete the following:

✓Number of Hotels Used: _____

✓Total Number of Rooms Used on Peak Night: _____

✓By whom were housing services performed?	Drop Down Options:
	<input type="checkbox"/> Event Organizer/Host
	<input type="checkbox"/> Management Firm – Management Firm's Name: _____
	<input type="checkbox"/> Housing Bureau – Housing Bureau's Name: _____
	<input type="checkbox"/> Convention & Visitors Bureau
	<input type="checkbox"/> Attendees Direct to Hotels
	<input type="checkbox"/> Other: _____

Hotel Room Comments: _____

✓ *Denotes Required Information If Hotel Rooms Were Used*

SECTION IV: ROOM BLOCK INFORMATION

This information should be completed for each hotel used. List headquarters hotel first, then others alphabetically.

✓Hotel Name: _____

✓Headquarters Hotel? Yes/No

Hotel Type:

Drop Down Options:

- ☐ Airport
☐ Downtown
☐ Resort
☐ Suburban
☐ Other

No. of Single Occupied Rooms Used: _____



1 bed/1 person

No. of Double Occupied Rooms Used: _____



1 bed/
2 people

OR



2 beds/
2 people

No. of Suites Used: _____

No. of Complimentary Rooms Used: _____

No. of Staff Rooms Used: _____

No. of Sub-Blocks: _____

Room Block Contracted Date: _____

Final Room Block Date: _____

✓Cut-off Date: _____

✓Was the Cut-off Date Exercised? _____

Yes/No

What was pick-up at the cut-off date? _____

✓Day & Date (i.e. Monday, March 1, 2003) *Must Be Manually Entered*	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7	Day 8	Day 9	Day 10	Day 11	Day 12	Day 13	Day 14	Additional days as necessary
✓Room Block when contracted															
Final RoomBlock															
90 day pick-up															
60 day pick-up															
30 day pick-up															
21 day pick-up															
14 day pick-up															
7 day pick-up															
✓Actual pick-up															
Requested Oversell Percentage	From event contract														
Actual Oversell Percentage	Manual Calculation: ["Maximum Pick-up" MINUS "Actual Pick-up"] DIVIDED BY "Maximum Pick-up" MULTIPLIED BY 100 = %														
Slippage from 21 day pick-up	Auto calc: "21 day pick-up" MINUS "Actual pick-up" = %														
% Sold (of contracted block)	Auto calc: "Actual pick-up" DIVIDED BY "Room Block when contracted" MULTIPLIED BY 100 = %														
% Sold (of final block)	Auto calc: "Actual pick-up" DIVIDED BY "Final Block" MULTIPLIED BY 100 = %														
✓% to peak	Auto calc: "Actual pick-up" DIVIDED BY the peak night pick-up MULTIPLIED BY 100 = %														

Room Block Comments: _____

Repeat for additional hotels as necessary

SECTION V: FOOD & BEVERAGE INFORMATION

*Were food & beverage (F&B) functions included in the event? Yes/No If No, go to Section VI. If Yes, complete the following:

Attendance at Largest F&B Function: _____

What type of F&B function was the largest in attendance?	Drop Down Options:
	<input type="checkbox"/> Break/Continental
	<input type="checkbox"/> Breakfast
	<input type="checkbox"/> Lunch
	<input type="checkbox"/> Reception
	<input type="checkbox"/> Dinner
<input type="checkbox"/> Other: _____	

What type of F&B function was the largest revenue producer?	Drop Down Options:
	<input type="checkbox"/> Break/Continental
	<input type="checkbox"/> Breakfast
	<input type="checkbox"/> Lunch
	<input type="checkbox"/> Reception
	<input type="checkbox"/> Dinner
<input type="checkbox"/> Other: _____	

F&B Function Schedule (#guar=Total Covers Guaranteed; #fed=Actual Covers Per Function Period):

	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7	Day 8	Day 9	Day 10	Day 11	Day 12	Day 13	Day 14	Additional days as necessary
	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	
Break(s)/ Continental(s)	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	
	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	
	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	
Breakfast(s)	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	
	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	
	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	
Lunch(es)	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	
	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	
	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	
Reception(s)	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	
	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	
	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	
Dinner(s)	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	
	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	
	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	

Did the event have any in conjunction with (ICW) F&B functions? Yes/No If No, go to Section VI. If Yes, complete the following:

ICW F&B Function Schedule (#guar=Total Covers Guaranteed; #fed=Actual Covers Per Function Period):

	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7	Day 8	Day 9	Day 10	Day 11	Day 12	Day 13	Day 14	Additional days as necessary
	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	Date	
ICW Breakfast(s)	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	
	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	
	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	
ICW Lunch(es)	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	
	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	
	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	
ICW Reception(s)	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	
	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	
	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	
ICW Dinner(s)	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	# held	
	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	# guar	
	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	# fed	

Food & Beverage Comments (Use this space to note important information not captured by the report such as green meetings provisions, food bank donations, etc.):

SECTION VI: FUNCTION SPACE INFORMATION

*Did the event require function space? Yes/No

If No, go to Section VII. If Yes, complete the following:

+Attendance at Largest Function: _____

Was the space for the largest function on a 24-hour hold? Yes/No

+Room Setup for the Largest Function:	Drop Down Options: <input type="checkbox"/> Theatre <input type="checkbox"/> Conference Style Set-up <input type="checkbox"/> U-Shaped Set-up <input type="checkbox"/> Classroom Set-up <input type="checkbox"/> Hollow Square/Rectangle <input type="checkbox"/> Rounds for 8 <input type="checkbox"/> Rounds for 10 <input type="checkbox"/> Other _____
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AV Setup for the Largest Function:	Drop Down Options: <input type="checkbox"/> Front projection <input type="checkbox"/> Rear projection <input type="checkbox"/> None <input type="checkbox"/> Other: _____
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+Facility Type(s) Used for Functions (check all that apply):	Options: <input type="checkbox"/> Hotel <input type="checkbox"/> Convention Center <input type="checkbox"/> Conference Center <input type="checkbox"/> Other: _____
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Were there extensive AV or technology requirements for one or more functions? Yes/No

If Yes, Number of Rooms with Extensive AV or Technology Requirements: _____

Total Number of Concurrent Breakout Sessions: _____

+Largest Daily Total of Concurrent Breakout Sessions: _____

Number of Seats Concurrent Breakout Sessions Typically Set For: _____

Typical Room Setup for Concurrent Breakout Sessions:	Drop Down Options: <input type="checkbox"/> Theatre <input type="checkbox"/> Conference Style Setup <input type="checkbox"/> U-Shaped Setup <input type="checkbox"/> Classroom Setup <input type="checkbox"/> Hollow Square/Rectangle <input type="checkbox"/> Rounds for 8 <input type="checkbox"/> Rounds for 10 <input type="checkbox"/> Other _____
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Was pre-function space required? Yes/No

Was a registration area(s) required? Yes/No # of Registration Areas: _____

Was a lounge(s) area required? Yes/No # of Lounges: _____

Was office space required? Yes/No # of Offices: _____

Was table top exhibit space required? Yes/No # of Table Top Exhibits: _____

Function Space Utilities Required:	Check from the following list: <input type="checkbox"/> Electricity <input type="checkbox"/> Water <input type="checkbox"/> Compressed Air <input type="checkbox"/> Natural Gas <input type="checkbox"/> Analog Phone Lines <input type="checkbox"/> ISDN Lines <input type="checkbox"/> Single Line Phone Set <input type="checkbox"/> Ethernet Internet Service <input type="checkbox"/> T-1 Lines <input type="checkbox"/> Other: _____
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Was move-in and/or move-out time required? Yes/No

If Yes, Number of Move-In Days Required: _____

If Yes, Number of Move-Out Days Required: _____

Was tear-down time required? Yes/No

If Yes, Number of Tear-Down Days Required: _____

Function Space Comments: _____

⁺ *Denotes Required Information If Function Space Was Used*

SECTION VII: EXHIBIT SPACE INFORMATION

*Did the event require exhibit space? Yes/No

If No, go to Section VIII. If Yes, complete the following:

^Facility Type Used for Exhibits (check all that apply):	Drop Down Options:
	<input type="checkbox"/> Convention Center
	<input type="checkbox"/> Hotel
	<input type="checkbox"/> Conference Center
	<input type="checkbox"/> Other Venue

Number of Exhibits: _____ Number of Exhibiting Companies: _____

^Type of Exhibits (check all that apply):	Drop Down Options:
	<input type="checkbox"/> 8'x10'
	<input type="checkbox"/> 10'x10'
	<input type="checkbox"/> Table Tops
	<input type="checkbox"/> Other: _____

^Gross Square Feet Used: _____ ^Gross Square Meters Used: _____

^Net Square Feet Used: _____ ^Net Square Meters Used: _____

^Number of Move-in Days: _____ ^Number of Move-out Days: _____

^Number of Show Days: _____ ^Show Days (i.e. M-W): _____

Show Hours: _____

Exhibit Utilities Required:	Check from the following list:
	<input type="checkbox"/> Electricity
	<input type="checkbox"/> Water
	<input type="checkbox"/> Compressed Air
	<input type="checkbox"/> Natural Gas
	<input type="checkbox"/> Analog Phone Lines
	<input type="checkbox"/> ISDN Lines
	<input type="checkbox"/> Single Line Phone Set
	<input type="checkbox"/> Ethernet Internet Service
	<input type="checkbox"/> T-1 Lines
	<input type="checkbox"/> Other: _____

Were there extensive AV or technology requirements for one or more exhibitors? Yes/No

If Yes, Number of Exhibitors with Extensive AV or Technology Requirements: _____

Was a general service contractor (GSC) used? Yes/No

If Yes, Number of Move-In Days Required for the GSC: _____

Was food & beverage required for any exhibitors (excluding concessions)? Yes/No

If Yes, Number of Exhibitors that Required Food & Beverage: _____

Exhibit Space Comments: _____

^ Denotes Required Information If Exhibit Space Was Used

SECTION VIII: FUTURE EVENT DATES INFORMATION

*Have future dates been confirmed for this event? Yes/No

What is the next open date for this event? _____

Next Published Start Date: _____ Next Published End Date: _____

Next City: _____ Next State/Province: _____ Next Country: _____

Next Facility: _____

Future Dates Comments: _____

Additional future dates as necessary

SECTION IX: REPORT DISTRIBUTION TRACKING

*This report was completed on (DATE) _____ by (FULL NAME) _____, (TITLE) _____, (EMPLOYER) _____. It was delivered via (Checkbox: Postal Mail, Email, Fax, OTHER: _____) on (DATE) _____ to:

- (FULL NAME) _____, (TITLE) _____, (EMPLOYER) _____
- (FULL NAME) _____, (TITLE) _____, (EMPLOYER) _____
- (FULL NAME) _____, (TITLE) _____, (EMPLOYER) _____
- (FULL NAME) _____, (TITLE) _____, (EMPLOYER) _____
- ***Additional lines as necessary***

This report was revised on (DATE) _____ by (FULL NAME) _____, (TITLE) _____, (EMPLOYER) _____. A revised copy was delivered via (Checkbox: Postal Mail, Email, Fax, OTHER: _____) on (DATE) _____ to:

- (FULL NAME) _____, (TITLE) _____, (EMPLOYER) _____
- (FULL NAME) _____, (TITLE) _____, (EMPLOYER) _____
- (FULL NAME) _____, (TITLE) _____, (EMPLOYER) _____
- (FULL NAME) _____, (TITLE) _____, (EMPLOYER) _____
- ***Additional lines as necessary***

Additional revision notations as necessary

Post-Event Report (PER) FAQ

Information provided courtesy of Holly Hospel & AhhHah! Discovery Tools

What is a Post-Event Report?

A Post-Event Report (PER) is a report of the details and activities of an event. A collection of PERs over time will provide the complete history of a recurring event. A PER is completed by the primary event organizer of an event, in conjunction with the suppliers for that event, and filed with each venue and facility that was utilized.

Why should I complete a report on an event that has already happened?

Once complete, the information a Post-Event Report (PER) contains can do many valuable things – all of which can benefit the event organizer and host.

- **Convey the “Bottom Line”:** The APEX PER can be used as a starting point to translate numbers to dollars and cents, which is the universal language of business. What decision makers (whether it is a boss or a supplier) really want to know is “How much did it cost? And how much was our net profit?”
- **Leverage Your Business:** Use it to analyze the numbers and conduct research. Numbers can act as a crystal ball while lending credibility and leverage. Numbers help an event organizer in two critical areas:
 1. Anticipation – Tracking numbers will reveal patterns that will help prepare for and predict the future of an event.
 2. Negotiation – Accurately demonstrating an event’s value gives an event organizer the credibility and confidence needed to negotiate effectively. For example, good historical data on room pick-up is vital when leveraging business with a hotel. Without it an event organizer is losing amenities, losing complimentary rooms, and losing discounted exhibit space.
- **Decision Making Tool:** A PER can help answer questions like “How many registration counters and registration personnel will be enough?” or “What food and beverage guarantee should be made?” It can give you insight into the unique characteristics of an event’s attendees. A PER can show if attendees bring their children to the event, if they make a vacation out of it, whether they drive or fly in, and whether they care about Saturday night airfare discounts. With this knowledge, an event organizer can make better decisions such as knowing that it is more important to negotiate for free parking instead of free health club passes.
- **Leverage Your Career:** Use it to demonstrate your professionalism and performance as a successful event organizer. If you have been tracking your numbers you can use this information during your annual performance review to demonstrate just how much you have contributed to the organization’s bottom line. The value of your professionalism and skill will become indisputable.