

# SOCIAL MEDIA INFLUENCERS

## FAMILIARISATION ASSESSMENT FORM



All sections to be completed with the necessary information or by placing an "X" or a number in appropriate box

Date Arrive	
Date Depart	

**PARTICIPANTS:** Note: Include main contact with asterisk\* and include Escort if known

Mr/Mrs/ Miss/Dr	First Name	Family Name	Role/Title	Representing

### PRINT / DIGITAL MEDIA INFORMATION (Repeat include this information for each account)

<b>Instagram Name / Handle</b>	
<b>Other Social Media Handles</b> Facebook/Google+/YouTube/Pinterest/Tumbr etc	
<b>Media Company Address</b> Media Street address Main Telephone number Mobile Phone Number	
<b>Media Website</b>	
<b>Total Followers across each platform utilised</b>	
<b>Category</b> Demographic	
<b>Age Range of Followers &amp; Gender</b>	
<b>Locations of Followers</b> Countries and Australian cities (please include % of share)	
<b>Account Statistics</b> (including engagement, reach etc and how you interact with your followers)	
<b>Other Publication/Blog - Distribution</b> How/Where is publication / blog distributed - eg: Local, Regional, National, Multi National or Global	
<b>Reader profile</b> Description of audience eg: Up-market professionals, General mainstream	
<b>Publication date</b> Estimated date of publication.	
<b>Frequency</b> How often do you post/Publication printed/distributed? eg: Daily, weekly, fortnightly monthly	
<b>Commissioned</b> Is story/blog commissioned? YES/NO	
<b>No. of stories</b> Advise how many different stories have been agreed. Eg: 2 stories	
<b>Length of story</b> How many posts?	
<b>Repeats</b> Will same story be repeated in other platforms	

# SOCIAL MEDIA INFLUENCERS

## FAMILIARISATION ASSESSMENT FORM



<b>Blog/Website Statistics</b> (including engagement, reach etc and how you interact with your followers)	
<b>Story angles</b> Describe in detail the story angle for each separate story. Eg: Australian Culture and its diversity, Nature, Fauna & Ecotourism.	
<b>Areas of interest</b> Please list any areas of interest that the journalist has, or that the publication has shown in the past. For example, quirky facts and sights, or local characters.	
<b>Additional Information</b>	
<b>Why should we host you?</b> We receive many requests from social media influencers. Please tell us what makes you stand out and how we can partner together. Please note that whilst Tourism Whitsundays is working on content for destination marketing, we are also working on behalf of our operators involved in the itinerary to ensure exposure and promotion of their business through this famil in exchange for their financial commitment. Please also address how you can ensure exposure to all operators involved.	

### MEDIA COVERAGE: Indicate X in appropriate box

	None	Credits	Fact Box	Feature Story	Advertorial	*Other Please specify
<b>Accommodation Coverage</b> What coverage is proposed for Accommodation:						
*Specify other coverage for accommodation						
<b>Products Coverage</b> What coverage is proposed for Product :						
*Specify other coverage for products						
<b>NOTE: Providing PDFs or scans of printed stories, or links to audio/video and digital stories, is a condition of the partnership</b>						

### PHOTOGRAPHY:

<b>Will media require photography assistance or equipment? YES / NO</b> If Yes, advise if using Tripod and/or any other special requirements.	
--	--

### INTERVIEWS: (Repeat as required)

<b>Interview requests</b> Who would Media like to interview?	
<b>Interview angle</b> What is general angle of interview?	
<b>Example questions</b> List 3-4 sample questions for each interview request made	

**SOCIAL MEDIA INFLUENCERS  
FAMILIARISATION ASSESSMENT FORM**



**INDEPENDENT ARRANGEMENTS:**

<b>Independent arrangements</b> Will media be making any independent arrangements for their visit to Australia. YES / NO? If YES, please advise date & time, details	
--	--

**PUBLIC LIABILITY:**

<b>Does Photographer have their own Public Liability Insurance</b> YES / NO? If YES - please attach copy	
---	--

<b>PARTICIPANT PERSONAL DETAILS</b> (Repeat as required for each participant)	
<b>Title</b>	(Mr/Ms/Mrs/Dr)
<b>Gender</b>	(Male/ Female)
<b>First Name</b>	(as per Passport)
<b>Preferred First Name</b>	(Nickname/English)
<b>Family Name</b>	(as per Passport)
<b>Business Position/Title</b>	
<b>Business Address</b>	
<b>Business/Preferred E-mail address</b>	
<b>Business/Preferred Direct Telephone No.</b>	
<b>Preferred Mobile No. contact</b>	
<b>Mobile No. when travelling in Australia</b>	
<b>Date of Birth</b>	(Day/Month/Year)
<b>Nationality</b>	
<b>Passport Number</b>	
<b>Date of expiry &amp; place of issue</b>	
<b>Languages spoken</b>	
<b>Do you smoke?</b>	Yes/No
<b>Do you have any food restrictions?</b>	Yes/No If yes, specify details
<b>Do you have any health restrictions?</b>	Yes/No If yes, specify details
<b>Do you have any phobias?</b>	Yes/No If yes, specify details
<b>Please describe your swimming capabilities.</b>	
<b>Emergency Contact</b>	(Name - Relationship - Telephone No)

**SOCIAL MEDIA INFLUENCERS  
FAMILIARISATION ASSESSMENT FORM**



<b>Do you have a current driver's licence?</b> Yes/No	
<b>Do you drive manual/ automatic?</b>	
<b>Driver's licence number</b>	
<b>Special Interests</b>	
<b>Advise any additional information / requests</b>	
<b>CONFIDENTIAL:</b> Estimate of weight / size for light aircraft flights & helicopters, and fitness level for activities if included in itinerary.	
<b>Weight</b>	Kgs/ Lbs
<b>Height</b>	Metres/ Feet
<b>Fitness Level</b>	High / Average / Low
<b>Dive Certification</b>	Yes/No – If yes, advise type/level