

TOURISM RECOVERY MARKETING PROGRAM 2020 APPLICATION FORM

COVID-19 has impacted our tourism industry at unprecedented levels. Our Recovery Marketing Program is designed to assist businesses to kickstart quickly and capture Perth visitors quickly, whilst preparing for the interstate borders to open in coming months. The Program has been developed by the Great Southern Centre for Outdoor Recreation Excellence (GSCORE) in partnership with Distinctly Tourism Management (DTM).

What's involved?

The program provides expert business support and industry mentoring to develop your **COVID-19 Business Recovery Marketing Plan**. **The participation rate is \$350+GST**. We have secured funding to deliver this program at a substantially subsidised rate. This represents a significant discount, with the program valued at \$4,500.

The Tourism Recovery Marketing Program consists of four components:

1. **Tourism Health Check** which includes a review of:
 - COVID-19 response
 - Product adaptation
 - Your competitive edge
 - Google & Social Analytics
 - Website optimisation
2. **Local Marketing Plan** - the responses from your Tourism Health Check will be assessed to provide you with a local marketing plan which will include one-on-one specific assistance with:
 - Post COVID-19 Consumer Profiling
 - Digital Content and Keyword Tips
 - Social Content Planning
 - SEO & Pay Per Click Advertising
 - Brochures and Local Distribution
3. **Connecting with your Ideal Customer** - Using the insights from your local marketing plan, you will begin to review and refine your product offering by focusing on the unique needs of the intrastate market. Over the course of 3 x 1 hour workshop sessions, you will develop detailed customer personas for your ideal market segments.
4. **TWA Survival Grant Application Assistance** - Assist businesses to complete their grant application.

How do I apply?

A limited number of places are available, and applications will be assessed via a competitive Expression of Interest (EOI) process. The program will be delivered at substantially reduced rates for successful applicants, with funding made possible by the Western Australian government's Regional New Industries Fund and the Lower Great Southern Economic Alliance.

TOURISM RECOVERY MARKETING PROGRAM 2020

EXPRESSION OF INTEREST

Applicant Name:			
Phone:		Mobile:	
Email:			
Business Name: (if applicable)			
Business Address:			
Business Type: (e.g. accommodation, tour, attraction, etc)			
Business Structure: (e.g. sole trader, partnership, company)			

How long has this business been in operation?

Years: _____

Are you a current member of Australia's South West (ASW)?

Yes/No

Are you a current member of WAITOC?

Yes/No

Are you accredited with any of the following schemes?

Tourism Council WA (TCWA)	Yes/No
STAR Rating Australia	Yes/No
Ecotourism Australia	Yes/No
Caravan/Holiday Park Accreditation	Yes/No

Have you applied or are you intending to apply for the Tourism WA Survival Grant?

Yes/No

SECTION 1: CURRENT TOURISM INDUSTRY INVOLVEMENT

What impact has COVID-19 had on your business?

What have you done to pivot your operations in response to COVID-19?

Current Operations

Do you have a business plan? Yes/No

Do you have an automated reservations system? Yes/No

Can you take online bookings that are instantly confirmed and paid for? Yes/No

Do you feel that your tourism product meets the needs of your customers? Yes/No

Are you willing to make changes to your products and services to meet demonstrated needs? Yes/No

How would you describe your capacity to grow your business?

Marketing

Do you have a marketing plan? Yes/No

How would you describe your current website?

Are you willing to invest in marketing your business more effectively to increase sales? Yes/No

Are you willing to change your business practices to reach more customers? Yes/No

SECTION 2: APPLICATION CONFIRMATION

- I have read the Recovery Marketing Program information
- I have completed the Expression of Interest Form
- I will commit sufficient time to attend all the workshop sessions and/or mentoring sessions and complete all activities and exercises

Signature: _____

Name: _____

Date: _____

RETURN THIS FORM TO:

Wendy Triplett, Training Coordinator, GSCORE via email: training@gscore.com.au