



WELCOME TO  
THE 2019 FRPA  
CONFERENCE!

## LEARNING OBJECTIVES



- Identify new strategies to plan successful programs and events
- List day-of-tips for event/program execution
- Discuss challenges/obstacles that may occur before, during and after your program/event



## Speakers

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# Back to Basics!

New to the field?  
Years of Experience?  
Why are you here?



## 1. THE IDEA

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## COMMUNITY NEED

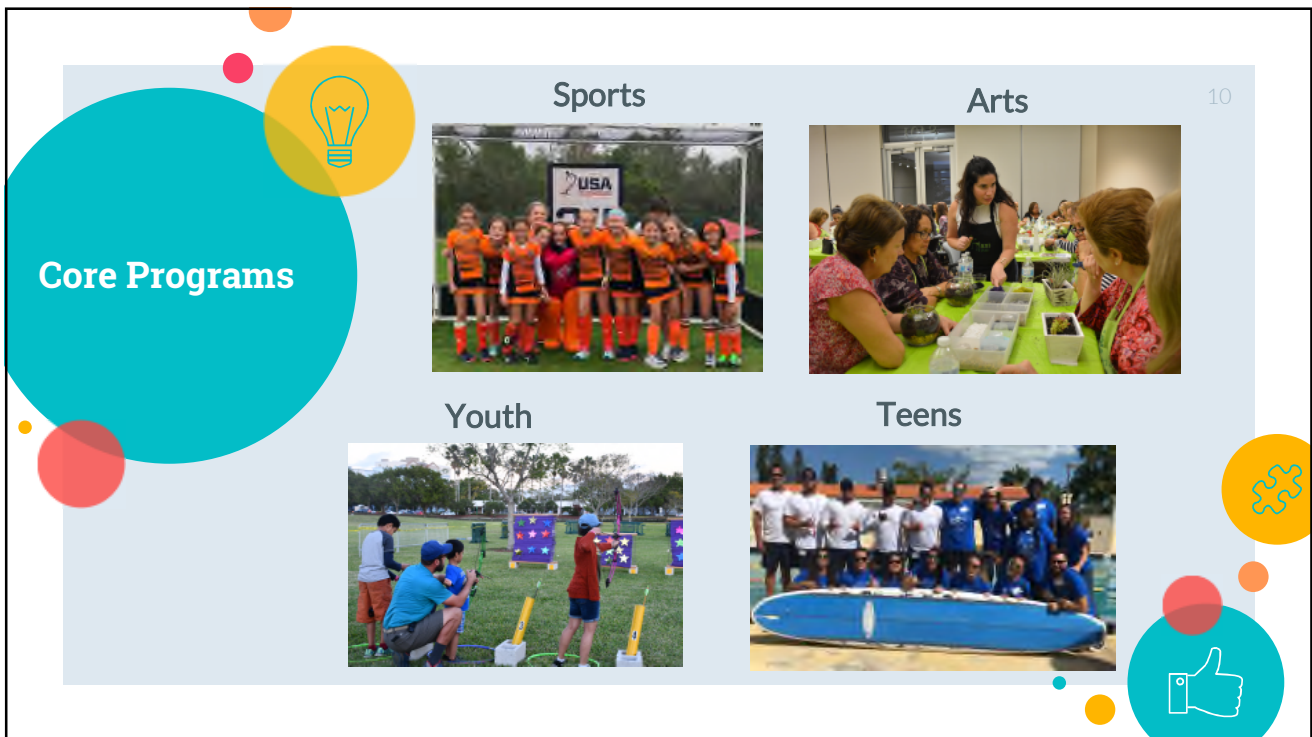
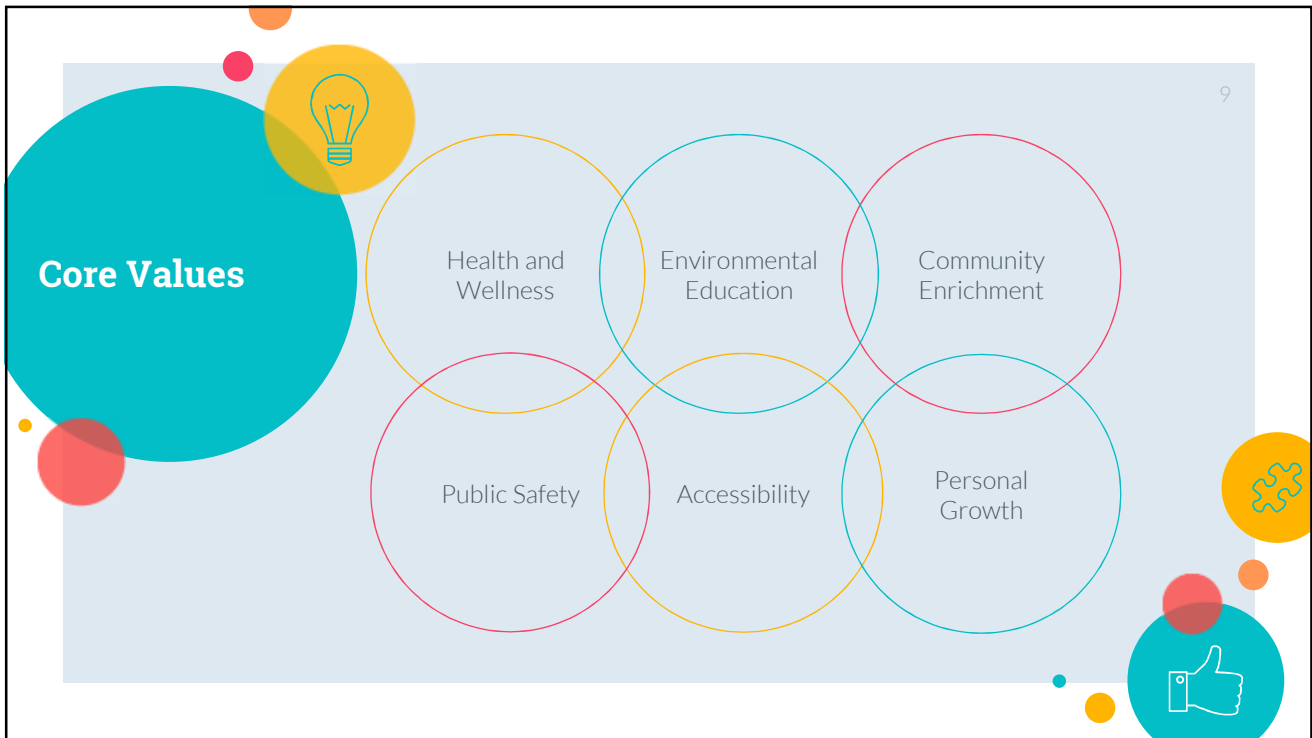


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## TARGET MARKET


- Demographics
- Psychographics






Core Programs


Family




Aquatics



Fitness & Wellness




Seniors




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Core Programs


Special Events & Projects



Environmental



Special Populations



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## 2. THE PROPOSAL

### Goals & Objectives

What are your goals for your program or event?



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## Financials

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### Budget / Funding

- Pricing
- How much do you need for staffing and general expenses?



### Partnerships/Sponsorships

- Outside Organizations Assisting
- Donations – Cash, In-Kind?
- General Support



## Scheduling

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### Location

- Indoors
- Outdoors
- Area

### Dates

- One-time
- Session

### Days of Week

- What day(s) work best for your target market?

### Time

- What time work best for your target market?
- Lighting issues?

### Conflicts?

- Holidays
- Other popular events and programming in the area







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Staffing


**Needed?**



**In-House / Outsource**



**Volunteers**



**Ratios**




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What Else?


**Equipment**

- Do you have the equipment?
- Will it be donated?
- Will you have to purchase it?




**Participant Transportation**

- How are your participants getting to your program?



**Special Considerations**

- Special Accommodations
- Easy Access for special groups



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# Helpful Examples


- Program/Event Proposal Samples

MIAMI BEACH PARKS & RECREATION		Recreation Program/Class Proposal			
Date of Submission:					
Program/Class Number:					
Age/Provider:					
Site Name:					
Regular Registration Start/Deadline:					
Program/Class Description (100%):					
Partnership / # of participants:					
Series I		# of class or hrs./series			
Start Dates:	Days:				
End Dates:	Times:				
Series II		Program/Class Fees			
Start Dates:	Days:	Resident: \$ -			
End Dates:	Times:	Non-Resident: \$ -			
Series III		100% Scholarship: \$ -			
Start Dates:	Days:	75% Scholarship: \$ -			
End Dates:	Times:	50% Scholarship: \$ -			
		Other Fee: \$ -			
OPERATING EXPENSES					
Vendor Name	Budget Code	Description	Estimated Cost	Actual Cost	
011-0950-000			\$0.00	\$0.00	
011-0950-000			\$0.00	\$0.00	
011-0950-000			\$0.00	\$0.00	
011-0950-000			\$0.00	\$0.00	
011-0950-000			\$0.00	\$0.00	
011-0950-000			\$0.00	\$0.00	
011-0950-000			\$0.00	\$0.00	
011-0950-000			\$0.00	\$0.00	
011-0950-000			\$0.00	\$0.00	
011-0950-000			\$0.00	\$0.00	
TOTAL OPERATING EXPENSES:			\$0.00	\$0.00	
STAFFING EXPENSE					
Decision Name	Dec. Hourly Rate	# of Hrs.	# of Decisions	Estimated Total	Actual Cost
\$ -	0.0	0	0	\$ -	\$ -
\$ -	0.0	0	0	\$ -	\$ -
\$ -	0.0	0	0	\$ -	\$ -
\$ -	0.0	0	0	\$ -	\$ -
\$ -	0.0	0	0	\$ -	\$ -
\$ -	0.0	0	0	\$ -	\$ -
\$ -	0.0	0	0	\$ -	\$ -
\$ -	0.0	0	0	\$ -	\$ -
\$ -	0.0	0	0	\$ -	\$ -
TOTAL STAFFING EXPENSE:			\$ -	\$ -	\$ -

REVENUE SUMMARY						
ESTIMATED REVENUE		Exp. # of Decs.	Subtotals	ACTUAL REVENUE	# of Decs.	Subtotals
Resident:	\$ -	0	\$ -	Resident:	0	\$ -
Non-Resident:	\$ -	0	\$ -	Non-Resident:	0	\$ -
Scholarship Discount:	\$ -	0	\$ -	Scholarship Discount:	0	\$ -
100% Scholarship:	\$ -	0	\$ -	100% Scholarship:	0	\$ -
75% Scholarship:	\$ -	0	\$ -	75% Scholarship:	0	\$ -
50% Scholarship:	\$ -	0	\$ -	50% Scholarship:	0	\$ -
Other Fee:	\$ -	0	\$ -	Other Fee:	0	\$ -
ESTIMATED TOTAL:			0	\$ -	ACTUAL TOTAL:	
			0	\$ -		
SPONSORSHIP / GRANT REVENUE						
Source:	Start:	End:	Subtotals			
			\$ -			
			\$ -			
			\$ -			
PROGRAM/CLASS BUDGET OVERVIEW (PROPOSED & FINAL):						
	Estimated	Actual				
Revenue Summary	\$ -	\$ -				
Sponsorship or Grant Revenue	\$ -	\$ -				
TOTAL REVENUE	\$ -	\$ -				
Operating Expense	\$ -	\$ -				
Staffing Expense	\$ -	\$ -				
TOTAL OPERATING BUDGET	\$ -	\$ -				
TOTAL NET BUDGET	\$ -	\$ -				
TOTAL COST RECOVERY % (SUBSIDIZED)			NDV/DI	NDV/DI		
OPERATING EXPENSE COST (without Staffing)						
Cost Per Participant:	Estimated	Actual	(Operating Expense divided by the number of participants)			
	NDV/DI	NDV/DI				
TOTAL OPERATING BUDGET COST (with Staffing)						
Cost Per Participant:	Estimated	Actual	(Operating Exp. + Staffing Exp. divided by the # of participants)			
	NDV/DI	NDV/DI				
TOTAL NET BUDGET COST (with Revenue and Staffing)						
Cost Per Participant:	Estimated	Actual	(Total Net Budget divided by the number of Participants)			
	NDV/DI	NDV/DI				
SUPERVISOR APPROVAL/DENIAL						
Miscellaneous Notes:						
Proposed Entered by: _____ Supervisor Signature: _____						
Deputy Director: _____ Director: _____						





**STEP UP DORAL PROGRAM REQUEST FORM**

*Individuals interested in proposing their programs and services must complete and return this form signed to: [Arletty.Brown@cityofdoral.com](mailto:Arletty.Brown@cityofdoral.com), and must send with valid insurance. All programs must be offered to the community for free as part of the Step Up Your Health, Doral Program.*

Use one form per program

Name of Company: \_\_\_\_\_

Name of Program: \_\_\_\_\_

Preferred Day and Time to Host Program: \_\_\_\_\_

Preferred Date to Host Program: \_\_\_\_\_

One Class or Multiple Throughout Year (circle): ☐ One-Time Class ☐ Multiple Classes

Participant Ages: from \_\_\_\_\_ to \_\_\_\_\_


Program Enrollment: Minimum \_\_\_\_\_ Maximum \_\_\_\_\_

Description of class: \_\_\_\_\_

Provider is responsible for: \_\_\_\_\_

Third-Party Sponsors or Vendors: \_\_\_\_\_

City is responsible for: \_\_\_\_\_





**STEP UP DORAL PROGRAM REQUEST FORM CONTINUED**

Program Provider Point of Contact: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

I hereby agree to participate as a Partner of the STEP UP YOUR HEALTH PROGRAM and agree to abide by all rules and requests of the City of Doral Parks and Recreation Department.

Print Name (Provider): \_\_\_\_\_

Signature: \_\_\_\_\_

City of Doral Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

OFFICE USE ONLY

Date Received: \_\_\_\_\_ Received by: \_\_\_\_\_

Provided Valid Insurance? \_\_\_\_\_

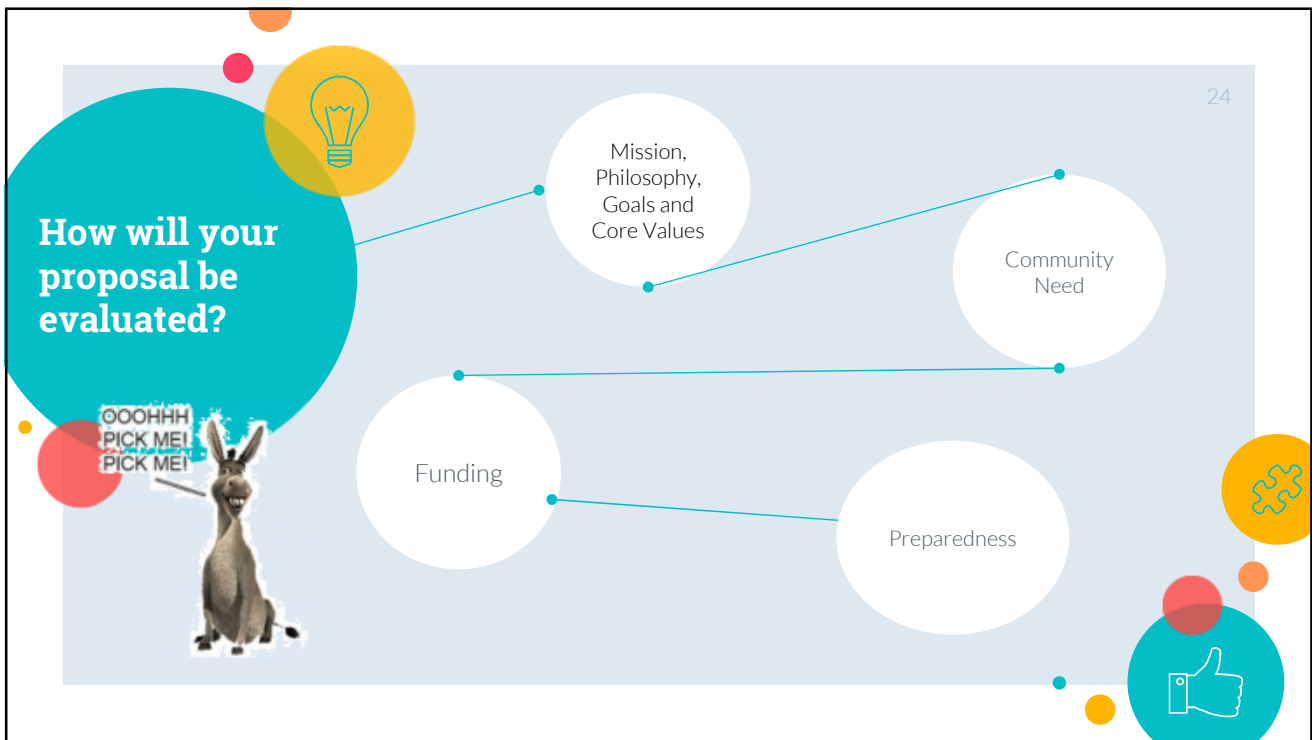
Approved? \_\_\_\_\_

Comments: \_\_\_\_\_





# 3. THE APPROVAL



## 4. THE PLANNING

Get your to-do  
list going!



### MARKETING



- Print
- Social Media
- Media
- Email Blasts
- Word of Mouth

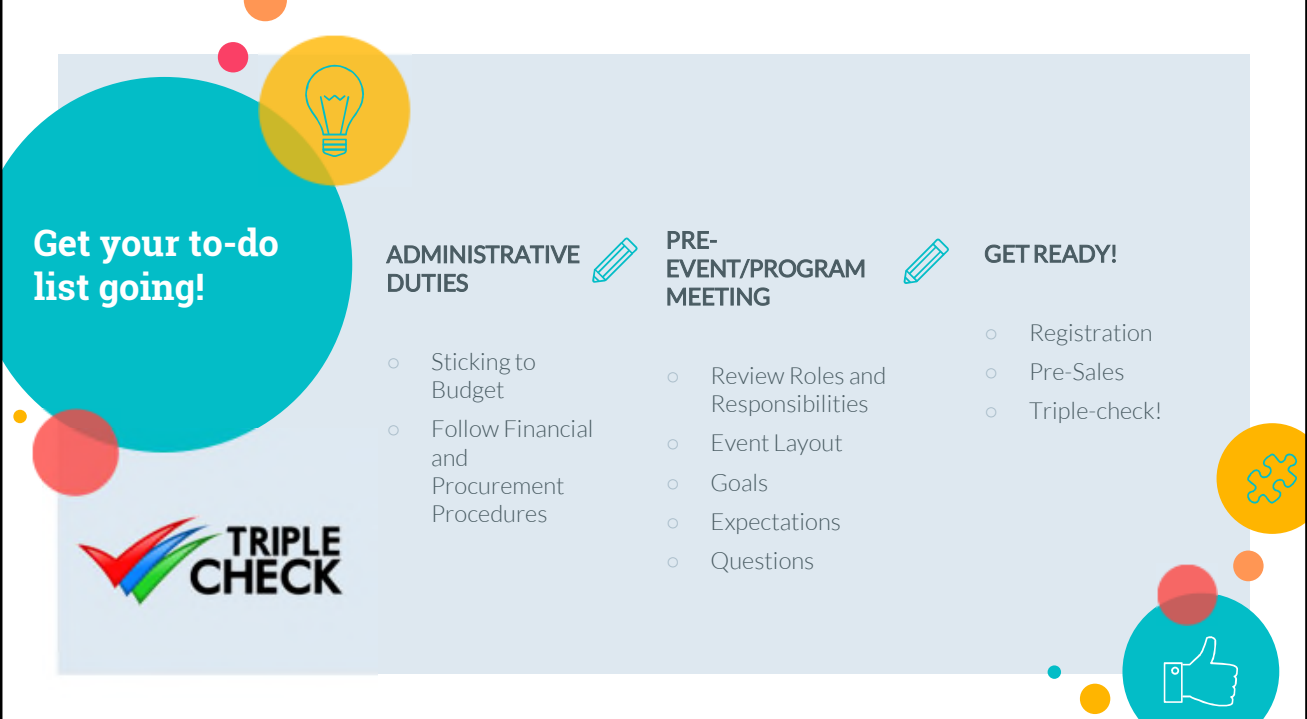
### LOGISTICS




- Equipment
- Supplies
- Rentals
- Location
- Timeline/  
Schedule
- Vendors

### STAFFING & VOLUNTEERS


- Roles and Responsibilities
- Outside Help:
  - Police
  - Fire
  - Partners



**Get your to-do list going!**

**ADMINISTRATIVE DUTIES** 

- Sticking to Budget
- Follow Financial and Procurement Procedures

**PRE-EVENT/PROGRAM MEETING** 

- Review Roles and Responsibilities
- Event Layout
- Goals
- Expectations
- Questions

**GET READY!**

- Registration
- Pre-Sales
- Triple-check!

**TRIPLE CHECK**



**5.**

**THE EXECUTION**

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## Day of Tips!

- Be Open to Adjustments & Have a Back-up Plan
- Stay Focused on Customer Service
- Over Communicate with all Parties
- Pics or it Didn't Happen!
- Stay Calm
- Keep Objective in Mind – Have FUN and take in the moment!

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## Surveys

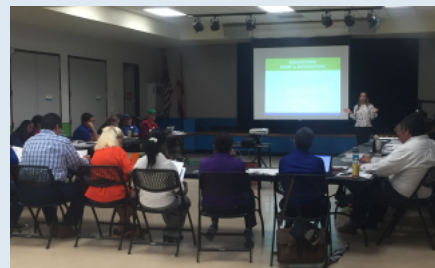
- Overall Experience
- Rate: Location, Schedule, Staff, etc.
- How did you hear about program or event?
- Demographics
- Incentives to complete-giveaways!

## 6. THE EVALUATION

### Post Meeting

#### Topics to Discuss:

- Hiccups
  - What worked?
  - What didn't?
- Analyzing Data
  - Participant Numbers
- Survey Says....!
- General Staff Feedback



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**Keep Your Notes!**

Record All Your Success & Failures for your next time around!



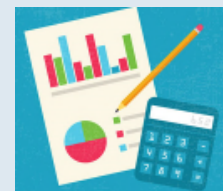
Don't Work Hard, Work Smart!

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**Reporting your Actual Numbers \$\$\$\$**

Complete your budget report to show all financial actuals:

- Final Revenue
- Final Operating Expenses
- Final Staff Expenses
- Sponsorship/Grant Revenue



This will calculate your Total Cost Recovery!

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# Examples

of Successful Programming & Events

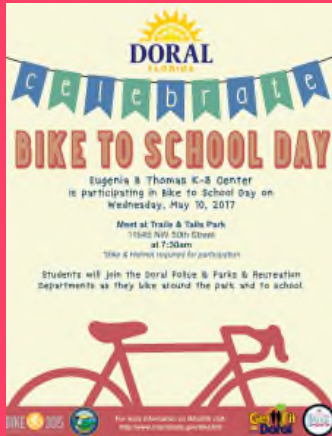
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## Miami Beach Senior Events



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## Doral Bike Safety Events



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# What are doing?

Tell us your stories! 😊

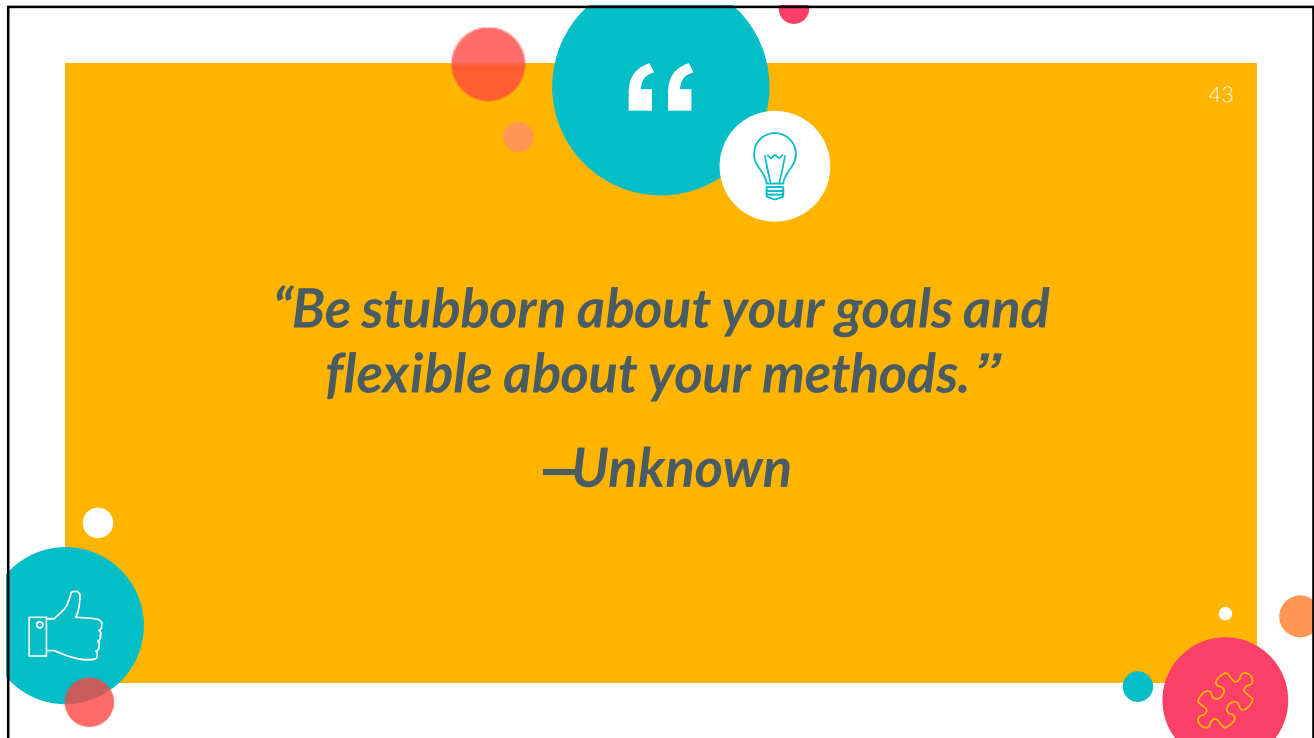




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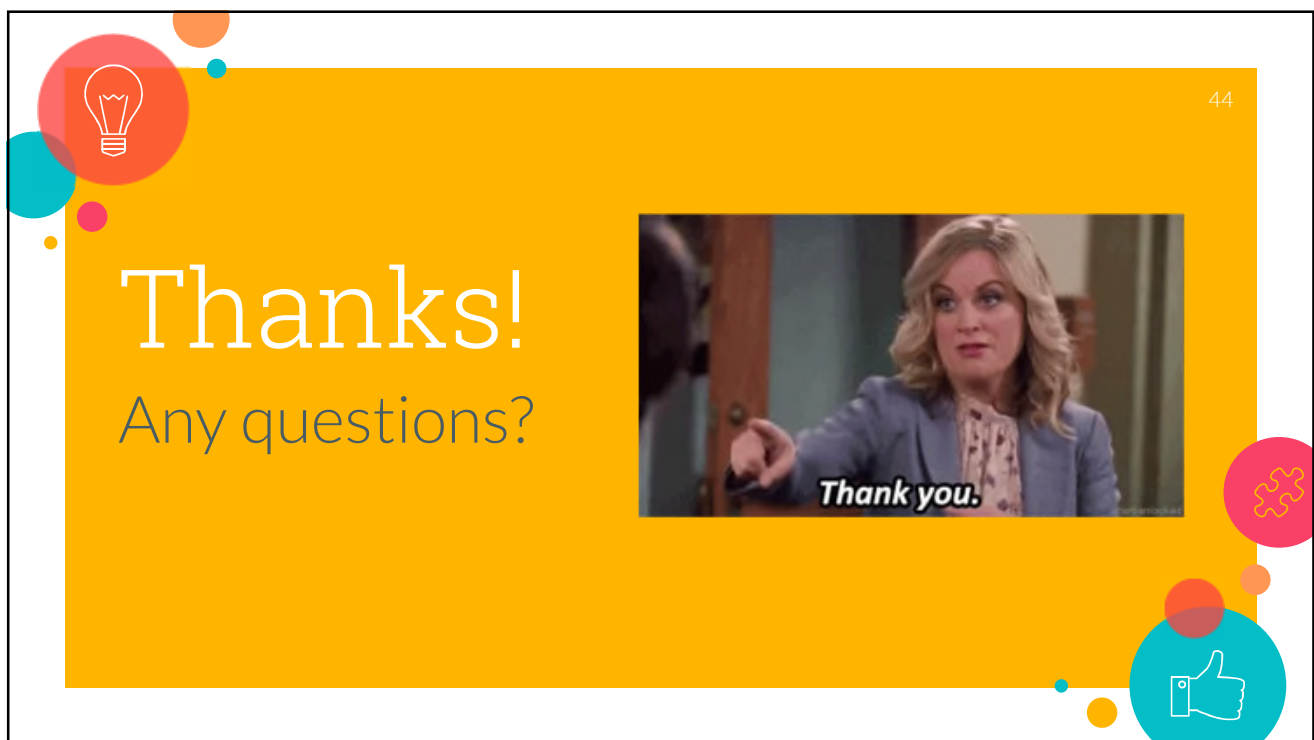

“Be stubborn about your goals and  
flexible about your methods.”

—Unknown



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Thanks!  
Any questions?





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**FRPA**  
FLORIDA RECREATION  
& PARK ASSOCIATION

FOR MORE INFORMATION ABOUT THE FLORIDA RECREATION AND PARK ASSOCIATION VISIT [FRPA.ORG](http://FRPA.ORG)