



Industry Partner Program

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EXPRESSION OF INTEREST FORM

A. PRINCIPAL/COMPANY BACKGROUND

COMPANY OVERVIEW

- 1) Name of the Company _____
- 2) Business Address _____
- 3) City _____ 4) State/Province _____ 5) Zip/Postal Code _____ 6) Country _____
- 7) Company type/Ownership Structure _____
- 8) Primary industry/vertical _____
- 9) Years in Business _____ 10) No. of Employees _____
- 12) Annual Revenues (in US\$) _____ (projected this year) _____ (last year) _____
- 13) Name of Principal/owner _____
- 14) Total number of members _____
- 15) Geographic spread of members (globally or within the US) _____
- 16) Key members events held during the year _____
- 17) Summarize the key member benefits _____

- 18) Details of key product or service offering _____



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19) Key principals of the company with designations _____

20) Major accomplishments to date _____

21) Short statement of future direction of the company _____

22) Company website _____

B. PRODUCTS & SERVICES OFFERED BY PARTNERS

OVERVIEW OF THE COMPANIES YOU HAVE CURRENTLY PARTNERED WITH; PRODUCTS AND/OR SERVICES OFFERED BY THE PARTNER

EXAMPLE 1

1) Name of Partner Company _____

2) Headquartered at _____

3) Product/Service _____

4) Primary industry/vertical _____

5) Partner since (no. of years) _____

6) Brief summary of success (if any) you have achieved on behalf of partner _____



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EXAMPLE 2

- 1) Name of Partner Company _____
- 2) Headquartered at _____
- 3) Product/Service _____
- 4) Primary industry/vertical _____
- 5) Partner since (no. of years) _____
- 6) Brief summary of success (if any) you have achieved on behalf of partner _____

C. HOSPITALITY, REVENUE MANAGEMENT AND/OR SaaS EXPERIENCE

OVERVIEW OF SPECIFIC EXPERIENCE IN RELATED FIELDS

- 1) Summary of experience (if any) in using or promoting any of IDEaS' Products or Services _____

- 2) Summary or experience (if any) in promoting solutions for the Hospitality industry _____



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3) Summary or experience (if any) in promoting SaaS solutions _____

4) Summary or experience (if any) in promoting Revenue Optimization _____

D. WHY IDEAS?

UNDERSTANDING YOUR INTEREST AND PRIMARY MOTIVATIONS IN PURSUING AN INDUSTRY PARTNER RELATIONSHIP WITH IDEAS

1) Explain your primary motivation in developing an Industry Partner relationship with IDEAS? _____

2) How would you describe your member's interest or demand for IDEAS' Products and Services? _____

3) Have you attended any of IDEAS' live or on-demand webinars available via www.ideas.com? If, Yes, how did you find the webinars useful? _____



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4) Describe how you foresee increasing visibility for IDEaS Solutions and Services within your member base? _____

5) Have you discussed pursuing an Industry Partner relationship with anyone at IDEaS? _____

E. REFERENCES

PLEASE LIST TWO BUSINESS ASSOCIATES THAT YOU HAVE COMMERCIAL RELATIONSHIPS WITH AS REFERENCES

REFERENCE 1

1) Name _____

2) Company _____

3) City _____ 4) State/Province _____ 5) Country _____

6) Work Phone _____ 7) Email Address _____

8) Website _____

REFERENCE 2

9) Name _____

10) Company _____

11) City _____ 12) State/Province _____ 13) Country _____



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14) Work Phone _____ 15) Email Address _____

16) Website _____

17) Date of submission (enter the date you plan to submit this form) _____

Expression of Interest Forms will be reviewed in the order they are received. If this form is accepted by IDEaS Revenue Optimization, you will be contacted to discuss next steps.

Thank you for your interest in the IDEaS Industry Partner Program.