

CONFIDENTIAL

**REPUBLIC OF KENYA
MINISTRY OF PLANNING & NATIONAL DEVELOPMENT
CENTRAL BUREAU OF STATISTICS**

MONTHLY SURVEY OF LOCAL AND INTERNATIONAL CONFERENCES

NOTES

- i. **Authority**
You are required to supply the information requested in this form under the Statistical Act (cap. 112) of the law of Kenya.
- ii. **Confidentiality**
The information collected in this form will be used to appraise the performance of conference tourism in the country and will not be diverted to unauthorized persons.
- iii. **Local Conference** is taken to mean any conference, seminar or workshop that draws some or all of its participants from outside Kenya.
- iv. **International conference** is taken to mean any conference, seminar or workshop that draws some or all of its participants from outside Kenya.
- v. **Capacity** means the maximum number of delegates the conference facility is designated to hold.
- vi. **Foreign delegates** are participants who are non-Kenyan residents irrespective of nationality.
- vii. **Local delegates** are participants who are Kenyan residents irrespective of nationality.
- viii. **Return of form** – You are required to complete two forms. The original should be sent to the Director of Statistics, Central Bureau of Statistics, Ministry of Planning & National Development, P.O. Box 30266, Nairobi not later than the 5th of the month following that covered by the return. You should retain the duplicate copy for future reference. No postage stamp is necessary when you use the enclosed official reply service label.

PART 1: GENERAL INFORMATION

- (a) Name of hotel/conference center _____
- (b) Address _____
- (c) Telephone number _____
- (d) Town or District if in rural area _____
- (e) Month for which information on this form refers _____ 20 _____
- (f) Capacity of your conference facilities _____
- (g) Did you host any conference(s) during the month ? Yes No (please tick)

If yes please complete part 2 overleaf for only those conferences starting during the month.

