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| **CULTURAL POLICY DEMOGRAPHICS** | | | | | | | | | | |  | | **QUESTIONNAIRE** | | | | | | **SPRING 2017** | | | |  | |
|  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| 1 | **NAME OF ORGANIZATION:** | | | | | | Hudson Festival of Canadian Film | | | | | | | | | | | | | | | | | |
|  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| 2 | **MAILING ADDRESS:** | | | | Same as Hudson Film Society | | | | | | | | | | | | | | | | | | | |
|  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| 3 | **CONTACT:** | | EMAIL: | | clintward@videotron.ca | | | | | | TELEPHONE: | | | | 416 884 4762 | | | | | | | | | |
|  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| 4 | **CONTACT PERSON:** | | | | Clint Ward | | | | | | | | | | | | | | | | | | | |
|  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| 5 | **COMMUNICATIONS:** | | | | WEBSITE: | | Hudsonfilmsociety.ca | | | | | | | | FACEBOOK | | | | yes | | | | | |
|  |  | |  | | TWITTER: | | no | | | | | | | | NEWSLETTER | | | | no | | | | | |
|  |  | |  | | PINTEREST | | no | | | | | | | | OTHER | |  | |  | | | | | |
|  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| 6 | **STATUS:** | | CHARITY | |  | |  | | NOT-FOR-PROFIT: | | | | X | |  | | OTHER | |  | | | | | |
|  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| 7 | **MEMBERSHIP:** | | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | ANNUAL MEMBERSHIP FEE: | | | | | | $0 | | | | | |  | | FAMILY RATE: | | | | $no | | | | | |
|  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | NUMBER OF PAID MEMBERS | | | | | | 0 | | | | | |  | | NUMBER ON MAILING LIST | | | | | | 100 | | | |
|  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | NUMBER OF PROFESSIONALS | | | | | | 0 | | SEMI-PROFESSIONALS | | | | | | 0 | | GENERAL IINTEREST | | | |  | |  | |
|  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| 8 | **STRUCTURE: Committee** | | | | BOARD OF DIRECTORS | | | | | | no | | INFORMAL GROUP | | | | no | | VOLUNTEER BASE | | | | yes | |
|  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | NUMBER OF BOARD MEETINGS PER YEAR Committee meetings as required | | | | | | | |  | | NUMBER OF MEETINGS PER YEAR | | | | | | | |  | |  | |  | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | DURATION OF BOARD: Committee | | | | | | YRS. Until resignation | |  | | ELECTION MONTH: | | | | | | | |  | |  | |  | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
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| 8 | | **NUMBER OF STAFF** | | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | |  | | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | FULL-TIME: | | | |  | | PART-TIME: 1 projectionist | | | |  | | EVENT SPECIFIC: Yes | | | |  | | NONE: | |  | |  | |
|  | | PAID | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | OPERATE THROUGH VOLUNTEERS | | | | | | | | YES: | | X | | NO: | |  | | SOMETIMES: | | | |  | |  | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| 9 | | **PROGRAMMING:** | | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | EVENTS: | | SHOWS | |  | | FESTIVAL | | 3 ½ days | | CONCERT | | no | | EXHIBITIONS | | | | no | | OTHER | |  | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | |  | | WORKSHOPS | | | | In future | | LECTURES | | In future | | DEMONSTRATIONS | | | | In future | | PERFORMANCES | | | |  | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | SPECIFIC ANNUAL EVENT/S: | | | | | | Hudson Festival of Canadian Film | | | | | | | | | | | | | | | | | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | |  | |  | | MONTH: | | March | | | | | | | | | | | | | | | | | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | |  | |  | | PLACE: | | Hudson Village Theatre | | | | | | | | | | | | | | | | | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| 10 | | **FINANCIAL STRUCTURE:** | | | | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | MEMBERSHIP FEES | | | | 0 | | FEES FOR SERVICE: | | | | 0 | | ENTRY FEES: | | | | 0 | | GRANTS: | | Not yet | |  | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | DONATIONS: | | | | sponsors | | TOWN | | 0 | | FUND RAISING: | | | | 0 | |  | |  | |  | |  | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | OPERATING BUDGET: UNDER $5,000 | | | | | | | | | | UNDER $10,000 | | | | UNDER $20,000 | | | | Over $20,000 | | | |  | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | |  | |  | |  | | over $100,000 | | | | over $250,00 | | | | over $500,000 | | | |  | |  | |  | |
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| 11 | | **SPACE** | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | DOES YOUR ORGANIZATION OWN A DEDICATED SPACE | | | | | | | | | | | |  | | YES | | X | | NO | |  | |  | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | DOES YOUR ORGANIZATION REQUIRE A DEDICATED FACILITY / IF SO WHAT | | | | | | | | | | | | | |  | | | | | | | | | |
|  | | A Theatre space | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | CURRENT MEETING PLACE/S | | | | | | Committee member house | | | | | | | | | | | | | | | | | |
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|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | EVENT LOCATIONS: | | | |  | | Hudson Village Theatre | | | | | | | | | | | | | | | | | |
|  | |  | |  | |  | |  | | | | | | | | | | | | | | | | | |
| 12 | | **DOES YOUR ORGANIZATION REQUIRE ASSISTANCE WITH ANY OF THE FOLLOWING SERVICES:** | | | | | | | | | | | | | | | | | |  | |  | |  | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | BOOK KEEPING | | | | no | | TRANSLATION | | | | yes | | GRAPHIC DESIGN | | | | no | |  | |  | |  | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | PHOTOGRAPHY | | | | no | | TECHNOLOGY | | | | no | | WEB DESIGN/ MAINTENANCE | | | | | | no | |  | |  | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | ADVERTISING | | | | YES | | NEWSLETTERS | | | | no | | RESOURCE INFORMATION | | | | | | no | |  | |  | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | OTHER: | |  | | | | | | | | | | | | | | | | | | | | | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| 13 | | **DOES YOUR ORGANIZATION REQUIRE SPECIALIZED EQUIPMENT:** | | | | | | | | | | | | | |  | |  | |  | |  | |  | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | X | | YES | |  | | NO | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | IF SO, WHAT:  Projector, screen, BR Player, Amplifier, Speakers | | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
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| 14 | | **HAS YOUR ORGANIZATION EVER APPLIED FOR A GRANT/S** | | | | | | | | | | | |  | |  | |  | |  | |  | |  | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | YES | | X | |  | | NO | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | IF POSSIBLE PLEASE NAME THE GRANT CONCERNED OR FINANCIAL SUPPORT | | | | | | | |  | | | | | | | | | | | | | |  | |
|  | | Canada 150 | | | | | | | | | | | | | | | | | | | | | |  | |
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|  | | WERE YOU SUCCESSFUL | | | | | |  | | NO | |  | |  | |  | |  | |  | |  | |  | |
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| 15 | | **WHAT ARE THE CURRENT CONCERNS OF YOUR ORGANIZATION** | | | | | | | | | | | | | |  | |  | |  | |  | |  | |
|  | | PLEASE LIST: | | | | DECLINING MEMBERSHIP | | | | | |  | |  | |  | |  | | OTHER | |  | |  | |
|  | |  | |  | | INSUFFICIENT FUNDS | | | | | |  | |  | | X | |  | | PLEASE LIST: | | | | | |
|  | |  | |  | | LACK OF VOLUNTEERS | | | | | |  | |  | |  | |  | |  | | | | | |
|  | |  | |  | | LACK OF DEDICATED SPACE | | | | | |  | |  | | X | |  | |  | | | | | |
|  | |  | |  | | LACK OF SPACE/EQUIPMENT STORAGE | | | | | | | |  | | X | |  | |  | |  | |  | |
| **16** | | **DOES YOUR ORGANIZATION RELY ON VOLUNTEERS FOR THE PROVISION OF SERVICES AND MANNING OF EVENTS** | | | | | | | | | | | | | | | | | | | | | |  | |
|  | | X | | YES | |  | | NO | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | HOW MANY VOLUNTERS OFFER THEIR SERVICES | | | | | | | | | | Up to 10 | | | | | | | | | | | | | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | IS IT POSSIBLE TO CALCULTATE THE NUMBER OF 'VOLUNTEER HOURS' PER MONTH / YEAR? | | | | | | | | | | | | | | | | | |  | |  | |  | |
|  | | Possible but haven’t done it | | | | | | | | | | | | | | | | | | | | | | | |
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| 17 | | **IS YOUR ORGANIZATION ECONOMICALLY SUSTAINABLE** | | | | | | | | | | | |  | |  | |  | |  | |  | |  | |
|  | | Maybe | | YES | | Maybe | | NO | |  | |  | |  | |  | |  | |  | |  | |  | |
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|  | | IF SO, HOW | | | |  | | INCOME GENERATION Ticket sales | | | | | | | | | | | | | | | | | |
|  | |  | |  | |  | | SELF-SUFFICIENCY | | | | | | | | | | | | | | | | | |
|  | |  | |  | |  | | SECURED FUNDING | | | | | | | | | | | | | | | | | |
|  | |  | |  | |  | | FUND RAISING ACTIVITIES | | | | | | | | | | | | | | | | | |
|  | |  | |  | |  | | OTHER Sponsors | | | | | | | | | | | | | | | | | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
| 18 | | **IS YOUR ORGANIZATION PLANNING ANY COLLABORATIVE EVENTS OR ACTIVITIES WITH OTHER LOCAL GROUPS** | | | | | | | | | | | | | | | | | | | | | |  | |
|  | | Possible | | YES | | Possible | | NO | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | HAVE YOU BEEN INVOLVED IN ANY COLLABORATIVE ACTIVITIES IN THE PAST | | | | | | | | | | | | | | | |  | |  | |  | |  | |
|  | |  | |  | | YES | | X | | NO | |  | |  | |  | |  | |  | |  | |  | |
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|  | | IF SO, CAN YOU PLEASE LIST | | | | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
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|  | | WAS THE EVENT/S SUCCESSFUL | | | | | |  | | YES | |  | | NO | |  | |  | |  | |  | |  | |
|  | | IF NOT, WHY NOT | | | |  | | | | | | | | | | | | | | | | | | | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | IS YOUR ORGANIZATION OPEN TO FUTURE COLLABORATION AND SHARING | | | | | | | | | | | | | | | |  | |  | |  | |  | |
|  | | Not really viable in a Festival context | | | | | | | | | | | | | | | | | | | | | | | |
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| **19. WHAT DOES 'CULTURE' MEAN TO YOUR GROUP**  **We would like to screen the best Canadian content available to us** | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **20** | | **WHAT IS THE AIM OF THE ORGANIZATION**   To continue with our 3 ½ day format but possible add a second screen location | | | | | | | | | | | | | | | | | | | | | | | |
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| **21** | | **WHAT ARE THE OBJECTIVES FOR ACHIEVING THIS**  **Succesful application for grants and sponsorship** | | | | | | | | | | | | | | | | | | | | | | | |
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| **23** | | **WHAT IS YOUR VISION FOR THE FUTURE OF YOUR ORGANIZATION**  **To add a second screen with the possibility of a 3rd. To make the annual Festival grow. Possible add workshops.** | | | | | | | | | | | | | | | | | | | | | | | |
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| 24 | | **WHAT IS YOUR VISION FOR THE FUTURE OF 'CULTURAL' HUDSON**  **That the three major Festival be a strong identification for Hudson – Film, Music, Theatre** | | | | | | | | | | | | | | | | | | | | | | | |
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| 25 | | **DO YOU HAVE A WISH LIST** | | | | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | X | | YES | |  | | NO | |  | |  | |  | |  | |  | |  | |  | |  | |
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|  | | PLEASE LIST | | | | Add Screens | | | | | | | | | | | | | | | | | | | |
|  | |  | |  | | Add workshops | | | | | | | | | | | | | | | | | | | |
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| **26** | | **HOW DO YOU THINK THE TOWN CAN HELP YOUR ORGANIZATION** | | | | | | | | | | | | | |  | |  | |  | |  | |  | |
|  | | Financial support | | | | | | | | | | | | | | | | | | | | | | | |
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| **27** | | **WHAT DO YOU EXPECT THE TOWN TO DO FOR YOUR ORGANIZATION** | | | | | | | | | | | | | |  | |  | |  | |  | |  | |
|  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | | Financial support and promotion | | | | | | | | | | | | | | | | | | | | | | | |
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| **28** | | **IS THERE ANYTHING YOU WOULD LIKE TO ADD** | | | | | | | | | | | | | | | | | | | | | | | |
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| CONTACT INFORMATION: as listed on page 1 | | | | | | | | | | | | | | | | | | | | | | | | | |
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