

Resources for Meeting Planners / Pre-Program Questionnaire

**Please fill this out as completely as possible and FAX to (815) 939-4890.
A representative will contact you to confirm receipt of the information.
Thank you!**

Company Name:

Your Name:

Title:

Phone:

Fax:

E-mail:

Website address:

Best time for someone to reach you:

Conference Hotel Information:

Hotel Name & Address:

Phone:

Fax:

Hotel Confirmation Number:

Name of meeting room:

Into what airport should we schedule Bill's flight?

How far is the hotel from the airport?

Meeting Information:

What is the purpose of your meeting?

Do you have a theme? If so, what is it?

Are there any speakers on immediately before or after Bill Guertin? If so, what is (are) their presentation topic(s)?

Which industry experts and/or company executives will be speaking at this meeting?

What is Bill's role in your program (opening or closing, keynote, breakout, etc.)?

What are the exact times for Bill's presentation?

Start Time:

End Time:

NOTE: If you could, please send us a copy of the meeting program and agenda so he can see how his program fits in. Thank You!

How will most of the audience be dressed?

How should Bill be dressed? (i.e., suit/tie, business casual, slacks/shirt, other)

Who will be introducing Bill to your group?

Company Information:

What are the 3 biggest issues your company is facing today?

What themes would you like to see brought up in the context of Bill's presentation?

What is most important to you in your working relationship with Bill?

When your people leave the program, what three concepts/skills/ideas would you like them to take away?

1.

2.

3.

Approximate # of people expected in the audience:

Are spouses invited? Yes / No

Male/Female: M ____ % F ____ %

Average age of attendees:

What are some of the challenges your organization and your people/members face on a day to day basis?

What separates your high achievers from the others?

What areas offer the greatest opportunity for improvement?

Have there been any significant events that have occurred, and that have affected, your industry, organization, or group during the past year? (i.e. mergers, downsizing, etc.)

What is the primary product or service that you offer?

What are the two most important benefits you offer to your customers?

A.

B.

What are two or three achievements of which your organization is most proud?

Please list the names and phone numbers of 3 to 5 key people in your group that will be at the program. With your permission, Bill may want to contact them to discover more information about your group.

	Name	Title	Phone #
1.			
2.			

3.

4.

5.