



6. What top challenges are your staff or association members currently facing? Are there morale issues that should be addressed?
  
7. What areas of participant performance need improvement or recognition?
  
8. Special jargon or terminology I should be aware of?

What issues or terms should I avoid?

9. **Program Mix** (Note: a. and b. should equal 100%):
  - a. Please spend \_\_\_\_\_% of your time delivering "**how to**" ideas with **take home** value.
  - b. Please spend \_\_\_\_\_% of your time delivering **motivation, entertainment**, stories.
  
10. a. **# of Attendees** \_\_\_\_\_ Avg. Age \_\_\_\_\_ % Male \_\_\_\_\_ % Female \_\_\_\_\_
  - b. **Audience make-up:** \_\_\_\_\_% Senior exec. \_\_\_\_\_% Mid-mgmt. \_\_\_\_\_% Board of Directors  
 \_\_\_\_\_% Officers/Sales reps. \_\_\_\_\_% Support/Clerical \_\_\_\_\_% Entrepreneurs \_\_\_\_\_% Other
  - c. **Positions / job titles:** \_\_\_\_\_
  - Ethnic Diversity:** \_\_\_ % Caucasian \_\_\_ % Asian \_\_\_ % Black \_\_\_% Hispanic \_\_\_\_\_ % Other
  - e. **Educational Level:** \_\_\_\_\_% H.S. Grad \_\_\_\_\_% College Grad \_\_\_\_\_% Masters/PhD
  - f. **Any spouses / special guests:** \_\_\_\_\_
  - g. **Businesses only:** \_\_\_\_\_ # of employees \_\_\_\_\_ assets/sales \_\_\_\_\_ # offices  
**Associations only:** \_\_\_\_\_ # of members
  
11. **Corporations**, please list names, titles and telephone numbers of senior executives, line managers and / or employees I can contact to get additional inside information. **Please provide names of contacts who reflect the greatest percentage of the audience make-up as noted above in question #10b and will be attending this meeting.**

**Associations**, please provide names of individuals who have registered for your conference or some key committee members who will be in attendance.

- Name \_\_\_\_\_ Title \_\_\_\_\_  
 Company \_\_\_\_\_ Tel.( ) - \_\_\_\_\_ Email \_\_\_\_\_

• Name \_\_\_\_\_ Title \_\_\_\_\_  
Company \_\_\_\_\_ Tel.( ) - \_\_\_\_\_ Email \_\_\_\_\_

• Name \_\_\_\_\_ Title \_\_\_\_\_  
Company \_\_\_\_\_ Tel.( ) - \_\_\_\_\_ Email \_\_\_\_\_

12. Name and title of senior executives or committee members present at this meeting:

• Name \_\_\_\_\_ Title \_\_\_\_\_  
Tel.( ) - \_\_\_\_\_ Email \_\_\_\_\_

• Name \_\_\_\_\_ Title \_\_\_\_\_  
Tel.( ) - \_\_\_\_\_ Email \_\_\_\_\_

13. Please list the people in your **organization/association** responsible for the following (If any listed in #12, write "see #12"):

• President/Exec. Director: \_\_\_\_\_ Title \_\_\_\_\_  
Tel. ( ) - \_\_\_\_\_ Email \_\_\_\_\_

• V.P./Sales & Marketing: \_\_\_\_\_ Title \_\_\_\_\_  
Tel. ( ) - \_\_\_\_\_ Email \_\_\_\_\_

• Training or Education Director: \_\_\_\_\_ Title \_\_\_\_\_  
Tel. ( ) - \_\_\_\_\_ Email \_\_\_\_\_

14. To extend the impact of Dawn and Corbin's message, would you like information about her learning materials? **Association's note:** We can partner with you to create added value follow-up tools for your members and non-dues **revenue** for your association. \_\_\_\_ Yes \_\_\_\_ No thanks.

15. Will a video or audio taping crew be on-site?

\_\_\_\_ Yes \_\_\_\_ No If Yes, Company Name: \_\_\_\_\_

Contact: \_\_\_\_\_ Tel. ( ) \_\_\_\_\_

16. Previous speakers used:

Name \_\_\_\_\_ Topic \_\_\_\_\_ Year \_\_\_\_\_

Name \_\_\_\_\_ Topic \_\_\_\_\_ Year \_\_\_\_\_

17. Meeting Time: Begin \_\_\_\_\_ End \_\_\_\_\_ My Program: Begin \_\_\_\_\_ End \_\_\_\_\_  
 Total # of attendees \_\_\_\_\_  
 For breakouts only: estimated # of attendees in my session: \_\_\_\_\_
18. Name of my introducer: \_\_\_\_\_  
 Title \_\_\_\_\_ Tel. # (\_\_\_\_\_) \_\_\_\_\_
19. What takes place immediately before / after my program (speaker, meal, break, etc.)? If there will be another speaker, please indicate topic.  
 Before: \_\_\_\_\_  
 After: \_\_\_\_\_  
 Comments: \_\_\_\_\_
20. Meeting location: Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 Hotel \_\_\_\_\_ Tel.#(\_\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_\_) \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 Hotel Contact \_\_\_\_\_ Tel.#(\_\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_\_) \_\_\_\_\_  
 Closest Airport \_\_\_\_\_ # miles from site \_\_\_\_\_ Travel Time \_\_\_\_\_
21. How can I best get from airport to site / hotel? Cab \_\_\_\_\_ Limo \_\_\_\_\_ Other \_\_\_\_\_  
 If someone is picking me up, please provide name: \_\_\_\_\_
22. If problems / emergencies arise on my way to program, who should I contact?  
 Name \_\_\_\_\_ Bus (\_\_\_\_\_) \_\_\_\_\_ Home (\_\_\_\_\_) \_\_\_\_\_
23. Please send me any of the following information you might feel is important for me to benefit you (if available):  
 \_\_\_\_\_ Mission / vision / values \_\_\_\_\_ Training programs-table of contents  
 \_\_\_\_\_ Strategic plan / objectives \_\_\_\_\_ Sample sales tracking and contact mgmt. reports

- |   |  |
|---|--|
| <input type="checkbox"/> Business / Marketing Plan                        | <input type="checkbox"/> Key product brochures + product knowledge |
| <input type="checkbox"/> Annual Report                                    | <input type="checkbox"/> manual sample pages (3-4 products)        |
| <input type="checkbox"/> Organization Chart                               | <input type="checkbox"/> Special promotions / campaigns            |
| <input type="checkbox"/> Meeting agenda / invitation                      | <input type="checkbox"/> Informative articles                      |
| <input type="checkbox"/> Sample completed perf. appraisals                | <input type="checkbox"/> Service measurement / feedback tools      |
| <input type="checkbox"/> Association magazine / newsletters               | <input type="checkbox"/> Sales & service recognition programs      |
| <input type="checkbox"/> Staff / company newsletter / flyers              | <input type="checkbox"/> Service standards                         |
| <input type="checkbox"/> Customer / member newsletters                    | <input type="checkbox"/> Job descriptions                          |
| <input type="checkbox"/> 3 industry journals / magazines                  | <input type="checkbox"/> Association Member Directory              |
| <input type="checkbox"/> Association new membership<br>packet and profile | <input type="checkbox"/> Other                                     |
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## THANK YOU!

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