PRE-PROGRAM QUESTIONNAIRE Fax to: 813-200-3745

Name of organization:	
Date of engagement:	
Start time and end time of my	
presentation(s):	
Contact name:	
company	
address	
work phone	
home phone (used only in	
emergencies)	
other #'s	
email	
Referred from:	
General and specific location of	
presentation or Executive	
Coaching (if other than by	
phone):	
Subject of presentation:	
When you'd like me to arrive:	
Attire for the event:	
Audio/Visual Capabilities:	
Mike	
Flip Charts	
Overhead Projector	
Audio/Video Taping Ability	
Powerpoint	
Expected audience size:	
Demographics of audience:	
Audience needs (your goals for	
them during this presentation):	
Has your organization had this	
topic in the past:	
Is the audience attending	
voluntarily?	
What other speakers has the	
audience responded to well:	
A	
Anything else you'd like us to	
know:	