

PRE PROGRAM QUESTIONNAIRE AND LOGISTICS

Gregg Gregory America's Business Navigator  
Designing cooperative Teams That Produce Result

To make your event an even bigger success, as well as to meet your organization's needs, we are requesting this information to help Gregg Gregory prepare his presentation.

Please return this completed form along with any additional material you believe will help him know your organization better, i.e. your annual report, promotional brochures, program guide, recent newsletters, etc.

Please send the questionnaire via email to: Francesca@TeamsRock.com or via US Mail to:

**TEAMS ROCK**

4505 Clearbrook Lane  
Suite B  
Kensington, MD 20895

*This questionnaire, as well as any related materials is due to us at least four weeks before your event.*

Organization's Official Name: \_\_\_\_\_

Organization's web site: \_\_\_\_\_

Specific division or Group: \_\_\_\_\_

Meeting Professional:

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Office Phone: \_\_\_\_\_ After Hours number: \_\_\_\_\_

Email: \_\_\_\_\_

Meeting Logistics:

Program Date: \_\_\_\_\_ Program Start time: \_\_\_\_\_ AM/PM

Venue Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Gregg Gregory, CSP  
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4505 Clearbrook Lane ❖ Suite B ❖ Kensington, MD 20895  
866-764-8326

Gregg's 1<sup>st</sup> Presentation time: \_\_\_\_\_ A M / P M

Meeting Room Name: \_\_\_\_\_

Topic/title: \_\_\_\_\_

Gregg's 2<sup>nd</sup> Presentation time: \_\_\_\_\_ A M / P M

Meeting Room Name: \_\_\_\_\_

Topic / title: \_\_\_\_\_

**Program:**

Meeting Theme: \_\_\_\_\_

Meeting Purpose: \_\_\_\_\_  
\_\_\_\_\_

Meeting Goal(s): \_\_\_\_\_

How will you measure the success of the program?  
\_\_\_\_\_  
\_\_\_\_\_

**Attendees:**

Demographics:

Number of expected attendees: \_\_\_\_\_ Men% \_\_\_\_\_ Women% \_\_\_\_\_

Age Range: \_\_\_\_\_ To \_\_\_\_\_

Spouses Present: YES \_\_\_\_\_ No \_\_\_\_\_

Describe the profile of the organization. Who is the organization's target audience?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What is the profile of the attendees – i.e. titles, nature of their work?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What are the top three things Gregg should know about this audience?

- 1 \_\_\_\_\_
- 2 \_\_\_\_\_
- 3 \_\_\_\_\_

Will there be anyone in the audience should Gregg take special note of and why?

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**Background:**

What are the challenges facing the audience and the industry today?

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What happens with the group before Gregg speaks?

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What occurs after Gregg finishes his talk?

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What if any activities do you wish for Gregg to participate in?

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Please provide us with the contact information for individuals in your organization who can discuss with Gregg specific issues, challenges, solutions and great news. For example : CEO, President, Executive Director, VP, HR Director etc.

<u>Name</u>	<u>Title</u>	<u>Email Address</u>	<u>Telephone</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Who are the other outside speakers at this event?

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Who have been your speakers for the last two major events? What did you like the most and what did you like the least?

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**Additional Logistics:**

How will Gregg's room be set up?

Theatre  Class room  Rounds  other \_\_\_\_\_

What date do you suggest that Gregg arrive in the event city? \_\_\_\_\_

What time is Gregg's sound check? \_\_\_\_\_ AM/PM

Who will introduce Gregg? \_\_\_\_\_

Office Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Travel Information:**

Our office will take care of Gregg's travel arrangements including hotel accommodations and transportation to and from the airport. If you would like to have someone pick Gregg up or you have specific vendors that you recommend, then please feel free to provide those to us.

Greeter or Car Service recommendation:

Name: \_\_\_\_\_ Phone 1: \_\_\_\_\_

Email: \_\_\_\_\_ Phone 2: \_\_\_\_\_

If venue is also the conference hotel or if you have a conference rate at a nearby hotel please provide our office with the conference or corporate rate code for booking.

Booking Code: \_\_\_\_\_ Conference rate: \$ \_\_\_\_\_

If there is not a hotel conference rate for this event, please provide our office with three nearby hotels.

	<u>Hotel Name</u>	<u>Phone</u>
1	_____	_____
2	_____	_____
3	_____	_____

**Reminders:**

We strongly encourage the use of any of our materials including Gregg's pictures and bio for promotional purposes.

Audio Video needs – Since these will vary greatly depending on several variables we ask that you please see the separate AV sheet on our web site for the specifics

Video or Audio recording is allowed with the following stipulations:

- 1 Archival purposes only – Two master copies provided to us along with the name of the name, email address, and phone number of the videographer to allow us to follow through.
- 2 If for resale – Two master copies provided to us along with the name of the name, email, and phone number of the videographer to allow us to follow through. Additionally a one time payment of \$1,000.00 for the rights to sell the video.

Please schedule a call with Gregg approximately one week prior to your event to cover any questions and to review your goals, objectives and mission for the program.

We would like to thank you for taking the time to fill out this pre program questionnaire and want you to know that you are welcome to call our office at anytime to talk about your program or ask any questions on how Gregg can help you make your event flow more smoothly and make it one of the best events your attendees have been a part of.