



To help make your event a huge success, as well as to meet your organization's needs, you can help by providing the following information. This information will help Gregg Gregory tailor his program to your specific needs.

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.

You can return the completed questionnaire electronically to Gregg's assistant, Jeff Sullivan at [JDSullivan@Wisdom-Seekers.com](mailto:JDSullivan@Wisdom-Seekers.com) or via US Mail to:

**TEAMS ROCK**  
4505 Clearbrook Lane  
Suite B  
Kensington, MD 20895

*Due to Gregg's often hectic travel schedule, we would like this questionnaire, as well as any related materials provided 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:

Event Date(s): \_\_\_\_\_ Program Start time: \_\_\_\_\_ Select

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

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

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

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

Gregg's 1<sup>st</sup> Presentation time: \_\_\_\_\_ Select

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

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

Gregg's 2<sup>nd</sup> Presentation time: \_\_\_\_\_ Select

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: \_\_\_\_\_ Select

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 \_\_\_\_\_

Who is in the audience should Gregg take special note of and why?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**BACKGROUND:**

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What happens with the group before Gregg speaks?

\_\_\_\_\_

\_\_\_\_\_

What occurs after Gregg finishes his talk?

\_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

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 t his event?

---

---

---

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

---

---

---

**ADDITIONAL LOGISTICS:**

How will Gregg's room be set up? Select Other: \_\_\_\_\_

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

What time is Gregg's sound check? \_\_\_\_\_ Select

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 the venue is also the conference hotel, or if you have a conference rate at a nearby hotel we ask that you please provide our office with the conference or corporate rate code for booking, and let us know if you have this set for direct bill to your master account

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

Billed to Master Account Select

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.