

Cie Murray's Pre-Program Questionnaire

This questionnaire enables Cie to better meet the needs of attendees and provide greater value. Will you please complete this form and fax it to 770-486-1615 or email to info@ciemurray.com as soon as possible? Feel free to answer N/A if a question doesn't pertain to your event .

CONTACT INFO

Name of Person Completing this Form _____

Contact person name & cell # at the event _____

AUDIENCE INFO

% Sex: Male _____ Female _____ % Age: 20-35 _____ 36-49 _____ 50+ _____

Approximately how many will be in attendance? _____

Please share the primary occupations and/or job titles of audience members.

What 3 events or tasks cause audience members the most stress on a regular basis?

What are the 3 primary workplace situations or challenges attendees/organ. are facing?

List 3 tasks that are considered priority for audience members to do their job?

What are 3 distractions that can occur during the workday that can hinder member audience performance?

What are some recent achievements or breakthroughs about audience members and/or organization?

Name the key executives that will be in Cie's audience. _____

Please provide names/phone numbers of three people Cie can contact to interview for ideas

*What actions would you like audience members to take after Cie's presentation?

What sensitive issues should be avoided? _____

What needs to happen as a result of Cie's participation for you to consider this event to be a success?

MEETING INFO

What's the purpose/theme of the meeting (annual meeting, awards banquet, etc.)

Venue name/address/phone_____

Hotel name/address/phone if different from venue_____

What is the specific location of Cie's Presentation...Room, Floor, etc._____

Best airport to arrive at_____

Estimated travel time from airport to meeting_____

Will there be a lavalier microphone on site? _____

Will there be a LCD projector on site?_____

How much time is allocated for Cie's presentation? _____

Will there be other speakers? If so, who and/or topics?

What will happen on the program before and after Cie?_____

Will the presentation be taped? (Remember we will need to give permission to do so)_____

COMPANY/ORGANIZATION INFO

What is the vision/mission statement for your firm/organization?_____

What are your primary products/services? _____

Who are your primary customers? _____

Who are your primary competitors by product/service category?_____

What differentiates or makes your organization and/or products unique from competitors?_____

OTHER RESOURCES

Clients often like to have additional educational materials available to audiences such as books to provide a continuous learning experience. If you are interested in having this for your group, please check the box below that is most appropriate.

A. _____ Group purchase in advance for each attendee at discounted bulk rate.

B. _____ Materials made available at the back of the room after the presentation for individual purchase.*

*If you checked B, please make sure that: 1)nothing will be on the program immediately following Cie's presentation for at least 20 minutes. 2)A table will be made available for Cie's materials by the exit door or just outside the room. 3)Someone from your group will assist with the sales.