



## CLIENT PRE-PROGRAM QUESTIONNAIRE

Dr. Dewett wants to ensure that his participation in your event adds as much value as possible. Please complete this questionnaire and return prior to your conference call with Todd. Answer as much as you can. We appreciate your time and attention to detail as we know your time is valuable. Thank you so much for your help!

### EVENT OVERVIEW

\_\_\_\_\_  
Name of Organization

\_\_\_\_\_  
Address City State Zip

\_\_\_\_\_  
Website

\_\_\_\_\_  
Date of Todd's Program Time of Todd's Speech AM PM

\_\_\_\_\_  
Primary Contact Person's Name Title

\_\_\_\_\_  
Office Phone Cell Phone Email

\_\_\_\_\_  
Secondary Contact Person's Name Title

\_\_\_\_\_  
Office Phone Cell Phone Email

\_\_\_\_\_  
Name of Event

\_\_\_\_\_  
Type of Event

\_\_\_\_\_  
Who Will Introduce Todd

\*You can find Todd's introduction here: <https://www.drdewett.com/event-planners>



Please list the speakers you've worked with in the recent past.

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What has worked or not worked with this audience in the past?

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Are there any acronyms, phrases or jargon that Todd should incorporate into his presentation?

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Are there any taboo subjects to stay away from or topics to be sure to include?

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What is the conference/event theme or focus? What does it mean to your organization?

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What is the conference social media hashtag?

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May we share on social media information and pictures about this event? Y/N

What is happening immediately BEFORE and AFTER Todd's presentation?

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Who else is speaking at this event?

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Would you like information about purchasing Todd's books as gifts for your attendees? Y/N



## LOGISTICAL INFORMATION

Where is the event taking place?

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Name of ballroom or conference room where Todd will be speaking?

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Nearby airports?

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Name of hotel where Todd will be staying. Please include confirmation number and address for hotel.

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Will a car service be provided? Uber? Cab? Other?

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Date and time of sound check with A/V team (ideally, Todd needs 10-15 minutes when the meeting room is empty)

\_\_\_\_\_ AM PM  
Date Time



## AUDIENCE INFORMATION

Number attending Todd's program \_\_\_\_\_ % male \_\_\_\_\_ % female \_\_\_\_\_

Average age \_\_\_\_\_ Age range \_\_\_\_\_

Who will be attending (i.e., executives, managers, employees, customers, clients, vendors, spouses)?

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Can Todd jump on a call with one or two members of your team, or representative members of the audience, to hear their thoughts about the organization and the event? Please list their names and phone numbers.

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## ORGANIZATION OVERVIEW

Please provide a brief description of your organization:

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## ORGANIZATION OVERVIEW CONTINUED

Biggest challenge for organization/audience members:

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Is there anything else Todd should know about the audience or your organization?

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## TODD'S PROGRAM

How did you learn about Dr. Dewett?

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Why did you choose Todd as one of your speakers?

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## TODD'S PROGRAM CONTINUED

Any special stories or examples you want Todd to include (if you've seen him speak before):

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Audio and Videotaping of Todd's presentation is allowed for your internal use only. We request copies of all videos and pictures taken.

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## Your Information

Printed Name 

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Title 

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Company 

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Office Phone 

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 Cell Phone 

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 Email 

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Completed by (Signature) 

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Date 

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