



DANA LIGHTMAN, Ph.D.

Absolutely. Positively. Uplifting.

“Create the outcomes you want. Regardless of the circumstances.”

Pre-Program Questionnaire

The answers to this questionnaire will help Dana design a program that is tailored to meet the needs of your audience.

Please fill this out as completely as possible and FAX to 215-885-5253.

Dana will contact you to confirm receipt of the information and to make sure the program meets : objectives.

INFORMATION

For Dana Lightman’s Presentation on _____
date

for _____
exact name of organization

Your name: _____

Your phone number: _____

Your email address: _____

Organization web address: _____

CONTACT PERSON (Prior To Arrival And During Meeting)

Name and Title: _____

Work Phone: _____ Cell Phone: _____

SECONDARY CONTACT in case of emergency

Name: _____

Phone: _____

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THE PROGRAM

1. What is the event title?
2. What is the purpose of your meeting?
3. Do you have a theme? If so, what is it?
4. What is your chosen title for Dana's program?
5. What time does the day begin?
6. What takes place immediately before Dana's presentation?
7. What takes place immediately after Dana's presentation?
8. Exactly when does Dana begin speaking?
9. What time does she finish speaking?
10. What time is the sound check?
11. What are the specific objectives for Dana's presentation?

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ORGANIZATION/INDUSTRY INSIGHTS

1. What are the three biggest issues facing your industry today?

1.

2.

3.

2. What are some of the biggest challenges the audience members face on a day-to-day basis.

Please list three key individuals Dana might contact to get an insider's perspective prior to the program.

Name and title: _____

Phone: _____ Email: _____

Name and title: _____

Phone: _____ Email: _____

Name and title: _____

Phone: _____ Email: _____

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3. Are there any sensitive issues or topics to be AVOIDED?

4. Is there anything else that will help Dana understand the audience better?

AUDIENCE ANALYSIS

1. Size of the audience:
2. Male/Female: M _____% F _____%
3. Average age of attendees:
4. General description of attendees:

LOGISTICS

1. The event/presentation will be held at:

Name: _____

Address: _____

Phone: _____

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2. Hotel accommodations: _____

Confirmation number: _____

If hotel is different from above, please indicate:

Name: _____

Address: _____

Phone: _____

3. If necessary, Dana will be transported from hotel to event site via:

Transport company name: _____

Phone number: _____

Location of pick up: _____

4. Dana will be transported from event site to airport via:

Transport company name: _____

Phone number: _____

Location of pick up: _____

Thank you for taking the time to complete this questionnaire. This information ensures a successful event... and your audience will appreciate the personalized presentation.