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## Pre-Program Questionnaire

We are Talent Concierge®, a talent management, media, and branding agency representing **today's top Talent**. We work with speakers who contribute a meaningful approach to your event's success. For this to happen, it is important that we receive as much information as possible about your organization and event so we can support you and prepare **our speakers** to create the best presentation to fit your specific needs.

Help us help you by completing this questionnaire and return with any additional marketing and/or promotional materials (program/event brochure, newsletters, invitations, press kits, etc.) prior to your **first conference call with a member of the Talent Concierge® team**. If your promotional material is unavailable, please complete this questionnaire as thoroughly as possible and follow up with additional information when applicable. We know your time is valuable, and we appreciate your attention to detail.

**PLEASE NOTE:** The information provided should reflect any information listed in the speaker's agreement. Any change or addition to this form does NOT constitute a change to the contract and **MUST** be requested and approved in writing by an authorized representative of Talent Concierge®. Once your completed questionnaire is received, we will schedule a call to discuss this and any other questions you may have. At that time, we will also schedule an additional call for you to personally meet our Talent to review any last-minute logistics our speaker should be aware of prior to arriving at the venue. Thank you for your help in making your event a success!

Name of Speaker: \_\_\_\_\_

Organization: \_\_\_\_\_

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

Website: \_\_\_\_\_

Date of the Program: \_\_\_\_\_

Is the conference LIVE, Virtual, or Hybrid? \_\_\_\_\_

For Virtual events, please attach separately the logistics for rehearsal and contact information for your tech team.

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**1. Primary contact prior to the event:**

Name: \_\_\_\_\_(Print) Title: \_\_\_\_\_

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

E-Mail: \_\_\_\_\_

**2. Primary contact during the event (if different than above):**

Name: \_\_\_\_\_(Print) Title: \_\_\_\_\_

Cell: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**LOGISTICAL INFORMATION**

1. What is the conference/event theme or focus? \_\_\_\_\_

2. What is happening immediately BEFORE **the speaker's** presentation? \_\_\_\_\_

3. What is happening immediately AFTER **the speaker's** presentation? \_\_\_\_\_

4. What speakers/presenters have presented for you in the past? \_\_\_\_\_

5. Who else is speaking/presenting at this event? \_\_\_\_\_

6. How long is **the speaker's** program? \_\_\_\_\_

**AUDIENCE PROFILE**

7. Number attending the program: (Estimate) \_\_\_\_\_.  
% male \_\_\_\_\_ % female \_\_\_\_\_
8. Average age: \_\_\_\_\_ Age range: \_\_\_\_\_
9. Who will be attending (i.e., executives, managers, employees (staff), customers, clients)?  
\_\_\_\_\_
10. Anything else we should know about this audience? \_\_\_\_\_

**ORGANIZATION OVERVIEW**

11. Please provide a brief description of your organization (primary product or service, most important benefits you offer your customers/members, unique features of your service, major competitors, major strengths/weaknesses, major competitors, etc.):  
\_\_\_\_\_  
\_\_\_\_\_
12. Who is your organization's target market?  
\_\_\_\_\_  
\_\_\_\_\_
13. What are your three most important objectives?  
1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_

EXPERIENCE EXCELLENCE WITH TALENT CONCIERGE®

14. What ideas/skills do you want your group to retain from **the speaker's** presentation?

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15. Would you like **the speaker** to provide you with some free articles and videos that you could share with your audience for several weeks after the event to ensure longer-lasting results?

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16. Rank in order of importance to your audience: entertainment, content, inspiration.

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

17. Check the top three (3) areas you would like **the speaker** to integrate into the presentation:

_____ Personal Development	_____ Persistence	_____ Performance
_____ Connection	_____ Purpose	_____ Mastery
_____ Sales	_____ Leadership	_____ Other

**Return the completed form by email to:**

hello@talentconcierge.co

Questions: 570.906.4395

MEETING LOCATION

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**Meeting Location**

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

Presentation Room: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

Directions from Hotel to Meeting Location

Estimated Travel Time from Hotel

**Please return the completed Travel Logistics pages**

**Hotel information and Speaking Location specifics to**

**[hello@talentconcierge.co](mailto:hello@talentconcierge.co)**

**Subject: [Conference Name], Date of Conference, Speaker's Name  
no later than 20 Days prior to start of the Conference. Thank you**

## EXPERIENCE EXCELLENCE WITH TALENT CONCIERGE®

### Hotel Information

Hotel arrangements are to be secured by [Conference Management]. A non-smoking room on the highest floor of the hotel, furthest away from the elevator, guaranteed for late arrival, should be billed directly to [Conference Management] unless otherwise specified. If there is a choice, **the speaker** prefers Marriott properties because of their frequent stay program.

**Please use the speaker's** Frequent stay number below when making the reservation. Talent prefers two beds in a room close to but not near the elevator and on one of the top floors.

**Speaker's First** Choice is Marriott Properties: they include Marriott Hotels, The Ritz-Carlton, JW Marriott, Courtyard, Springhill Suites, Fairfield Inn & Suites, Residence Inn, TownePlace Suites, and Marriott Executive Apartments.

**Speaker's Marriott Rewards Number is 280 121 134**

If a Marriott is not an option, the **speaker** is happy to stay wherever it is most convenient for you. Please fill in the hotel information field and return it to **hello@talentconcierge.co**.

Name of Hotel: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

Confirmation #: \_\_\_\_\_ Nearest Airport: \_\_\_\_\_

Dates of Reservation:

Arrival: \_\_\_\_\_ Departure: \_\_\_\_\_

Name of person **speaker** should contact in an emergency: \_\_\_\_\_

Cell phone number: \_\_\_\_\_

TRANSPORTATION

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**Arrival Procedure** (*choose one*)

- We will pick up **Speaker** at the airport. Location (i.e. baggage claim, outside, etc.)  
(**Speaker's** cell phone number will be provided separately)

Name of person picking up **Speaker**:

Cell phone:

Make and Color of car:

- The speaker** should use a Taxi/Uber. Please provide the hotel address, directions, and an estimated travel time from the airport to the hotel.

Thank you for completing and submitting this questionnaire.  
It helps us help you create an Experience with Excellence.

**Please return the completed Travel Logistics pages**

**Hotel information and Speaking Location specifics to**

[hello@talentconcierge.co](mailto:hello@talentconcierge.co)

**Subject: [Conference Name], Date of Conference, Speaker's Name  
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