

DrNiki's Speaking Engagement Questionnaire



The following questionnaire will assist us in suggesting and preparing a presentation that will fit your event theme and company requirements.

CONTACT INFORMATION

Your contact information is private and confidential and will be retained exclusively by us for essential communications with you.

Required Fields are in BOLD

Your NAME:

Email:

Title:

Company/Organization:

**Brief description
of company/organization:**

Address:

Telephone:

Fax:

Website:

Cut-off date to book speaker:

THE EVENT

Event Title:

Event Description:

Event Dates & Times:

Event or Speaker Theme:

Speaker Appearance Date/Time(s):

Type of Meeting/Conference:

(awards, annual, training etc)

Specific Objectives for Speaker presentation:

DrNiki's role in the program:

(keynote, seminar or luncheon speaker, etc)

Will attendees be eating during the presentation?

- Yes
 No

Will there be coffee/lunch break before or after the presentation?

- Yes
 No

Who is the Master of Ceremonies?

(name and title)

Who will be introducing DrNiki?

(name and title)

List of additional speakers and topics

List professional speakers you have used in the past

Specific likes/dislikes about their performance

AUDIENCE/ATTENDEE ANALYSIS

Expected Number of Attendees:

Are spouses invited? Yes No

Percentage of male versus female:

Average age of attendees:

Average income of attendees:

Attendees position:

(sales, marketing, managers, etc)

Main challenges/concerns that you would like to see change or improve

Areas your company would like to improve

COMPANY PROFILE INFORMATION

Main things we should know about your company/group

What your company does

Target market/industries for your organization

Your average customer

The primary product /service that you sell

Your major competitors

Additional comments
or information that would
be helpful in tailoring
this presentation
for your group

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and fax to +603 41422901
or email the PDF to bookings@premierhorizon.com