

Dr. Jim Dillahunty

The Art & Science of Business Leadership®

Pre Program Checklist

For your convenience, here's a checklist containing all of the other stuff you will need to know. Please fill out the appropriate information and fax it to Dr. Jim Dillahunty (Fax; 858-547-7706) at least **3 weeks prior** to the event.

A/V Requests:

- Flip Chart and markers.
- Lavalier wireless microphone.
- Small table for props and water on stage.
- Video Projector from PC interface and screen
 - (Dr. Dillahunty will provide laptop and/or USB memory stick)
 - We can provide Audience Response Systems at additional costs

Room Setup: Although we understand it is not always possible, the following seating arrangements are preferred:

- For Luncheon/Dinner presentation, half rounds.
- For General Sessions/breakouts, classroom seating.
- For Workshops, classroom seating- chevron style.

Stage/platform setup: If a podium is necessary for the introducer/opening or closing remarks please have it placed to one side of the stage or make arrangements to have it removed as Dr. Dillahunty takes the stage. The table requested above should be the only table on stage.

Lighting:

- Full house lights are preferable.

Product Sales: (If product sales are not permissible/appropriate, please skip this section)

- We will ship the appropriate number of products to the hotel/event location approximately one week prior to my arrival. *Would you prefer they are shipped to Dr. Dillahunty's attention at the hotel or do you have a different preference?* _____

- The best place to set up products is on a 6'-8' table at the back of the room. Dr. Dillahunty will meet with the volunteers prior to his presentation to give them the moneybag, credit card slips and price sheet.
- Following the event, it may be necessary to ship any remaining product back to our office. UPS return labels will be supplied for your convenience.
- A check for 10% of product sales will be issued to your organization approximately 7-10 days following the event.

Make check payable to: _____

Travel Expenses: Expenses consist of airfare, ground transportation, airport parking, tips, lodging and meals.

- Airline reservations will be made approximately 5 weeks prior to the event date.
- We request that you direct bill a non-smoking room, late arrival guaranteed, including meals to your master account. *Hotel name* _____
confirmation/reservation number: _____
- We recommend that you make arrangements for someone to meet Dr. Dillahunty at the airport and take him back following the event. If the event is not being held at the hotel, please make arrangements ahead of time for someone to transport Jim to and from the event. *Please provide the name and the cell phone number of the person who will transport him to and from the airport:* _____

Pre-Program Questionnaire

Name of Sponsoring Organization: _____

Logistics:

Nearest Airport: _____

Approx. miles from hotel/site: _____

Method of transportation provided to and from the airport: _____

Hotel Info, if different from event site (Name, Address, Phone Number): _____

Tell us more...

of Attendees: _____ Age Range: _____ Male: _____% vs. Female: _____%

General Titles and Job Responsibilities of attendees: _____

What is the theme for your event? _____

What is the mission/philosophy statement for your company/organization?

If you have a website, please list the address: _____

What changes do you anticipate in your organization/industry in the near future?

If there is a special program or project you are currently conducting within your organization or department, please briefly describe its name, nature, and any accompanying slogans: _____

What is unique about your group? (i.e. seasonal work flow, special clientele, unusual hours, travel, etc.): _____

Is there anything of significance that this group can be proud of accomplishing?

Please list any in-house or marketing specific language, jargon, phrases, or words applicable to your group that might be incorporated into this presentation:

Specifically, what “local color” might be used in this presentation? This could be anything, such as a new company policy, an in-house buzzword, a local drinking place, poor food, a broken piece of equipment, local weather, or achievement of a top official in your organization. _____

Overall objectives of meeting or conference: _____

What are your "specific" objectives for me? (How will you know if I hit the target?) _____

Any "seeds" you would like me to plant: _____

Is there anything I haven't asked that you think I should know about your organization that would make this program more meaningful?

Key people to recognize in the audience or get further input from:

Name: _____ Title: _____

Phone #: _____ Ext _____

Name: _____ Title: _____

Phone #: _____ Ext _____

Program Schedule:

What time(s) (exactly) will I be speaking? _____ to _____, _____
to _____, _____ to _____

What's happening before and after my presentation? _____

Are there any special events going on around the time of my presentation that you would like me to take part in? _____

Deadlines:

Are there deadlines that we need to be aware of to help your job go more smoothly? (i.e. handouts, CEU forms... _____

Miscellaneous:

Will there be other speakers? YES NO If Yes, Who? _____

What other topics will be covered? _____

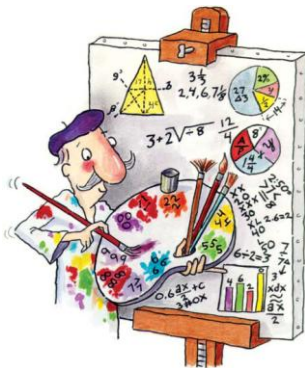
Please list past speakers: _____

Introducer (name and title): _____

How did you hear about me? _____

Are product sales permissible/appropriate? YES NO

Note: Please send a copy of all memos, programs announcements, brochures, and other promotional materials relating to this presentation. In addition, any annual reports, company newsletters/papers/flyers, or key product brochures would be appreciated. Thank you very much for helping me to customize my talk for your group. Please send all information to



Dr. Jim Dillahunty
7220 Trade St, Suite 310,
San Diego, CA 92121 USA
O) +858-547-7750
(C) +858-220-4107 (Global)
(H) +760-736-0113
(Fx) +858-547-7706
(E) jdillahunty@msn.com
(W) www.NewParadigms.com

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Please return questionnaire at your convenience prior to_____.

