



Meeting Detail Questionnaire

Please take time to fill out the questionnaire so that Trudy can design her presentation to your specific needs. Please fax or email this form back to Karen Best within 24 hours.

Fax: 972-899-3679 / Email: karen@workforceexcellence.com .

About the Event:

Date: _____

Meeting Start Time: _____ End Time: _____

Trudy Report in Time _____

Check-in

Procedures: _____

Any pre-event dinner or activities that Trudy will be included in? Yes ___ No ___

If yes, details:

Meeting Location Details: (please include map):

Address: _____

Phone: _____ Location on site (room number): _____

Attendees (please provide names and titles):

Onsite Contact Information:

Contact Name: _____ Title: _____

Cell Phone: _____ Email: _____

In case of an emergency on the way to the site, who would be the alternative contact if you are not unavailable?

Name: _____ Cell phone: _____



TRAVEL LOGISTICS:

Name of Closest Airport: _____

Recommended Hotel: _____

Recommended Car Service: _____

PLEASE EMAIL YOUR COMPANY LOGO TO: karen@workforceexcellence.com