

## **Program Details**



o aid in Steve's preparation for your event, we would like to gather the following information. Please complete this document and submit it as soon as possible. Each question is extremely important to ensure Steve understands the agenda.

EVENT					
DATE OF EVENT	:		CLIENT:		
EVENT REASON:					
ORG ANIZATION'S	SOCIAL MEDIA INFORMATION:				
SOMETHING UNIO	QUE ABOUT YOUR ORGANIZATION:				
PRESENTA	ATION(S)				
Topic:			ng A Difference (Inspiration) Hide Your Goat (Attitude) w Me (Leadership)		
SPEAKING TIME:	: START -	FINISH	ROOM NAME:		
SPEAKING TIME:	START -	FINISH	ROOM NAME:		
A / V CHECK TIME:			Audience Size:		
PERSON INTROD	ucing Steve:				
VENUE					
VENUE NAME:_					
Address:					
Сіту:			STATE:	ZIP CODE:	
PHONE:			FAX:		
	INFORMATION ide a mobile phone number in c	ase of an	emergency.		
ONSITE CONTA	ACT:		TITLE:		
Office Phone:		Mobile Phone:			
FAX:			EMAIL:		
Address:					
CITY			CTATE:	710 C 00	F.

## **GROUND TRANSPORTATION**

Please have Steve arrange his own ground transportation

Client will arrange a professional car service for Steve to be picked up / returned to the airport

Car Service Name:	Driver's Name:				
Driver's Mobile Phone:	Confirmation:				
PICKUP LOCATION:	NEAREST AIRPORT:				
MILES FROM AIRPORT TO VENUE:					
HOTEL Hotel accommodations are to be made by client with the room, taxes, Internet and parking to be billed to client's master account. A King Bed (non-smoking) room is required and must be guaranteed under Steve's name. If you would like Steve to make his own reservation, please check the appropriate box.  Please have Steve make his own reservation  Client will arrange for Steve's hotel  Required and Guaranteed: Non-smoking room, King bed, room tax, Internet and parking (if applicable)					
Hotel:					
	CHECK-OUT DATE:				
Confirmation Number:					
PHONE:	FAX:				
Address:					
Сіту:	STATE: ZIP CODE:				