



**Safety 24/7/365**

### **Pre-Program Checklist**

The following preparations will help us make your event successful!

Please fill in the blanks with your information and return to our office as soon as possible.

Presentation Date(s) and Time(s): \_\_\_\_\_

Company: \_\_\_\_\_

Approximate Size of Audience: \_\_\_\_\_

Event Details: \_\_\_\_\_

Materials/Literature: Please provide a copy of your meeting agenda or any promotional meeting materials. Any company information such as newsletters, mission statements, safety issues your facing, employee handbook etc. would be helpful. \_\_\_\_\_

Location: Where is the event taking place? \_\_\_\_\_

Facility Name Room#: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: City/State/Zip: \_\_\_\_\_

Other Comments: \_\_\_\_\_

Contact Information: Who can answer any questions about the event and presentation?

Contact #1 Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Email: \_\_\_\_\_ Cell #: \_\_\_\_\_

Address: City/State/Zip: \_\_\_\_\_

Contact #2 Name: \_\_\_\_\_ Phone#: \_\_\_\_\_

Email: \_\_\_\_\_ Cell #: \_\_\_\_\_

Address: City/State/Zip: \_\_\_\_\_

Other Comments: \_\_\_\_\_

Travel: Which airport or train station is closest to the event and the preferred mode of travel?

Airport: \_\_\_\_\_

Train Station #: \_\_\_\_\_

Travel Mode:  Car  Plane  Train  Other

Lodging: If lodging is necessary and not pre-arranged, please provide some recommendations.

Hotel Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

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

Hotel Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

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

Audio/Visual:

Will a PPT Projector be available?  Yes  No Will a Wireless Microphone be available?  Yes  No

Tony will need a podium:  Other \_\_\_\_\_

Fee: Remember payment is due for the presentation within 30 days following the receipt of the invoice. The invoice will include the presentation plus the travel expenses