



The following is a list of questions that I will ask during our phone consultation one week prior to your event. Please review these questions and be prepared to answer these very important items. My goal is to make the evening as smooth and worry free as possible. Remember that this is a list of general questions. Feel free to note any additional questions or requests that you would like.

### **General Information**

Corporation or Event Name: \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Event Date: \_\_\_\_\_  
Type of Event: \_\_\_\_\_  
Uplighting Package Added?  Yes  No  
*If yes, Color Choice:* \_\_\_\_\_

### **Hall Information**

Event Location: \_\_\_\_\_  
Event Address: \_\_\_\_\_  
Location Phone #: \_\_\_\_\_  
Location Room Name: \_\_\_\_\_  
Location Contact Name: \_\_\_\_\_

### **Other Contact Information**

External Caterer?  Yes  No  
*Company Name:* \_\_\_\_\_  
*Contact Name:* \_\_\_\_\_

### **Event Highlights**

Number of Guests: \_\_\_\_\_  
Guest Arrival Time: \_\_\_\_\_  
Cocktail Hour?  Yes  No  
*If yes, Location:* \_\_\_\_\_  
Cocktail Music?  B.B.'s Best  Special Musician  No  
Time of Dinner: \_\_\_\_\_  
Dinner Music?  B.B.'s Best  Special Musician  No  
How is Dinner Served?  Sit Down  Family Style  Stations  
 Buffet  Hors d'oeuvres Only

Per contract, the DJ is to be included for dinner. Please complete the following.  
*If dinner is "sit down", please specify entrée:* \_\_\_\_\_  
*If seating is assigned, please specify table #:* \_\_\_\_\_



Presentations or Speeches?  Yes  No

*If yes, When?*  Before Dinner  After Dinner

*Name/Role or Title:* \_\_\_\_\_

*Name/Role or Title:* \_\_\_\_\_

*Name/Role or Title:* \_\_\_\_\_

*Name/Role or Title:* \_\_\_\_\_

*Name/Role or Title:* \_\_\_\_\_

Introduction of Prayer/Blessing?  Yes  No

*Name/Role or Title:* \_\_\_\_\_

Video or Slide Show Presentation?  Yes  No

*If yes, Time/Contact:* \_\_\_\_\_

Request Cards Acceptable on Tables?  Yes  No

### **Dance Information**

Dance Reception Start Time: \_\_\_\_\_

Dance Reception End Time: \_\_\_\_\_

Hokey Pokey?  Yes  No  Request Only

Chicken Dance?  Yes  No  Request Only

Electric Slide?  Yes  No  Request Only

Cha Cha Slide?  Yes  No  Request Only

Cupid Shuffle?  Yes  No  Request Only

Late Night Appetizers?  Yes  No

*Time:* \_\_\_\_\_ *Location:* \_\_\_\_\_ *Selection:* \_\_\_\_\_

**Special Dances/Songs?**

Examples: Birthdays, Anniversaries, Friends, etc....

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Songs you would not like to hear: \_\_\_\_\_

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Notes:

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