VINCENT PAUL GROUP, INC.

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CORPORATE SPEAKING ENGAGEMENT FORM:

* Event Date[s]:	* Initial Contact Date:
* Name Of Organizati	on/ Corporation
* Contact Person Hea	rd From:
* Address Of Place To	Speak:
* Telephone:	*Fax:*Email/ Website:
* Time To Begin Spea	king:*Time To End Speaking:
* Date/ Time To Arriv	e: *No Expected:
	Business Seminar;Business Conference;Company Event; ;Management Event;Leadership Event;Other
* Publicities/Promotion	ns: _TV; _Radio; _Internet; _Handbills; _Posters; _'PapersOthers
* Title/ Theme To Spe	ak On:
* Accommodation/ Ho	tel Reservation(s):
* Meal(s) Included: [Yes] [No] *Transportation/ Car Provided: [Yes] [No]
* Airport [Nearest To	Speaking Venue]:
* Airline Reservation[[Host To Discuss Flight Bookings With Us; Or To Make Airline Reservation[s] Timely {To Avoid Costly Airfare} & Furnish Speaker With Flight Info.
* Pick Up Person:	
* Other Relevant Info	.
* How Did You Hear	About Dr. Paul Vincent: *TV_ *Radio_ *Newspaper_ *Our Books
*Charisma *Our	E-Newsletter *Google/Online Ad *Our Website *Other
* Signatur <u>e</u> :	*Date:

After Completing This Form; Please Email Or Fax It Back To Our Office To Complete Booking. Thank You! *Please Note: Upon Approval, Host To Contact Our Office To Discuss Honorariums For Our Corporate Event Speaking!