

IN-PERSON OR VIRTUAL EVENT

SPEAKERS' CHECKLIST

Below are items to consider as you work with and prepare speakers/presenters for your event. Customize this checklist based on an in-person or virtual event.

EVENT TITLE:

SPEAKER INFORMATION			
SPEAKER NAME			
SPEAKER ORGANIZATION			
PHONE NUMBER		MAILING ADDRESS	
CELL NUMBER			
EMAIL			
CONTACT NAME & TITLE		WEBSITE	
CONTACT PHONE NUMBER		CONTACT EMAIL	
TRANSPORTATION ARRANGE/REIMBURSE (in-person only)		TRANSPORTATION ARRANGED (in-person only)	<input type="checkbox"/>
ARRIVAL TIME (in-person only)		DEPARTURE TIME (in-person only)	
ADDITIONAL SESSION(S), IF ANY, WILL SPEAKER STAY FOR?			
COLLEAGUES JOINING SPEAKER?		COLLEAGUE(S) NAME, TITLE	
STAYING FOR MEALS? (in-person only)		MEALS TO INCLUDE IN HEAD COUNT OR ANY DIETARY RESTRICTIONS? (in-person only)	
W-9 FORM SENT?	<input type="checkbox"/>	COMPLETED W-9 FORM RECEIVED	<input type="checkbox"/>

PRESENTATION			
PRESENTATION TITLE			
PRESENTATION DATE		PRESENTATION LENGTH	
EVENT LOCATION (location or platform)		PRESENTATION FORMAT	
PRESENTATION OVERVIEW			
PRESENTATION DUE DATE		PRESENTATION RECEIVED	
SPEAKER CONFIRMED?	<input type="checkbox"/>	DATE CONFIRMED	<input type="checkbox"/>
REHEARSAL REQUESTED? PREP CALL SCHEDULED?		REHEARSAL AVAILABILITY	
REHEARSAL – SCHEDULED DATE AND TIME		AV OR TECH CONTACT	
INTERNAL POINT OF CONTACT		SPEAKER GREETER (in-person only)	

TECHNICAL SPECIFICATIONS

NAME OF EQUIPMENT REQUIRED	COMMENTS: SPEAKER HAS ALL EQUIPMENT NEEDED, SPEAKER NEEDS TO OBTAIN ADDITIONAL EQUIPMENT, ETC.

ASSISTANCE NEEDED WITH PRESENTATION PREPARATION (embedding video or sound, etc.)	
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DESCRIBE STAGING SETUP AND REQUIREMENTS	
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AV OR TECH POINT OF CONTACT (in-person only)		AV OR TECH CELL PHONE (in-person only)	
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AV OR TECH EMAIL (in-person only)		ADDITIONAL AV OR TECH STAFF (in-person only)	
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TECH POINT OF CONTACT (virtual only)		TECH CELL PHONE (virtual only)	
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TECH EMAIL (virtual only)		ADDITIONAL TECH STAFF (virtual only)	
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DESCRIBE ANY ADDITIONAL SETUP REQUIREMENTS	
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TASK CHECKLIST			
	RESPONSIBLE PARTY	TASK	DATE COMPLETED
<input type="checkbox"/>		Schedule review	
<input type="checkbox"/>		Presentation review	
<input type="checkbox"/>		Presentation title obtained	
<input type="checkbox"/>		Presentation synopsis obtained	
<input type="checkbox"/>		Speaker biography obtained	
<input type="checkbox"/>		Speaker photo obtained	
<input type="checkbox"/>		Presentation deck received	
<input type="checkbox"/>		Transportation review	
<input type="checkbox"/>		Needed equipment purchased/shipped	
<input type="checkbox"/>		Follow-up technology review	
<input type="checkbox"/>		Schedule rehearsal	
<input type="checkbox"/>		Logistics confirmation with speaker/speaker representative	
<input type="checkbox"/>		Honorarium/payment information & W-9 obtained	

ADDITIONAL COMMENTS

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