

BUSINESS PARTNER INVOLVEMENT WORKSHEET

Event Name: _____

Program Name: _____

Core Topic of Program:

- | | |
|--|---|
| <input type="checkbox"/> General Legal Management/Leadership | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Finance | <input type="checkbox"/> Marketing |
| <input type="checkbox"/> Human Resources | <input type="checkbox"/> Trends in Legal Services |
| <input type="checkbox"/> Facilities Management | |

Projected Date(s): _____

Program Planners:

Name	Telephone	E-mail Address
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Name	Telephone	E-mail Address
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Duration:

- | | | | |
|--|-----------------------------------|--|----------------------------------|
| <input type="checkbox"/> 2 hours | <input type="checkbox"/> Half Day | <input type="checkbox"/> Full Day | <input type="checkbox"/> Evening |
| <input type="checkbox"/> Multiple Evenings (# of Evenings _____) | | <input type="checkbox"/> Multiple Days (# of Days _____) | |

Estimated Participants: _____

Vendor Participation: YES NO

If yes, consider targeting certain vendor groups who would be most interested in the topic or nature of the program.

If yes, in what capacity will they participate? (Check all that apply.)

- | | |
|--|--|
| <input type="checkbox"/> Sponsor Food and Beverage | <input type="checkbox"/> Sponsor Materials (notebooks, handouts) |
| <input type="checkbox"/> Sponsor Speaker(s) | <input type="checkbox"/> Table Top Displays |

Make a list of all possible benefits to the vendors who will participate, for example:

- | | |
|---|---|
| <input type="checkbox"/> Name recognition (where, how many times) | <input type="checkbox"/> Product Introduction |
| <input type="checkbox"/> Access to a target interest group | <input type="checkbox"/> Business Card Exchange |
| <input type="checkbox"/> Networking | <input type="checkbox"/> Social Event |
| <input type="checkbox"/> Management Education | |