



TGS Media Charity/POP Customer Questionnaire

Free Publications, Take One Programs, Brochures, Distribution Software & Consulting

TGS Pays It Forward!
 Sign on with us, and we'll **donate 5% back** to your organization!*



*Donation will be made after distribution.

Chapter Name

Event Name & Date

Mailing Address

Date

City State Zip Code

Contact Name Phone Number

Email Cell Number

1. a. What event is this for?

b. How many total POP locations to setup?

c. Do have posters or additional requirements for distribution?

d. Type of POP display:

e. Number of brochures per stop:

f. Print Quantity expected :

g. How are they packaged?

h. Do you wish to restock?

i. Special Drop requirements (Event Drops, Out of Area Drops, Large Quantity Drops, or Special Requirements required):

J. Please explain your special drop requirements:

2. Who is your target audience and type of locations to avoid distribution?

3. In what city/cities do you wish to target with this POP distribution?

4. Do you have other events in the next 12 months you may require POP distribution?

If "Yes", when, dates and what market?

5. How have you distributed in the past?
- Volunteers Internal Distribution Hired our own drivers
 Out Sourced CircServ

6. How far in advance of the event do you want the POP distribution completed?

7. What did you like about your last distribution and what would you want to change? What problems or challenges did you encounter?

8. Please share with us any other things you would like us to consider concerning your upcoming distribution?

Thank you for filling out our customer questionnaire. We will use this information to assemble a proposal based on your distribution needs. We will return a proposal within 48 hours of receiving this form. Thank you again and we will be in touch with you.
TGS Management Team

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