

Consulting Application Form

“ONE Idea, Properly Implemented and Executed, Is All You Need to Take Your Business to the Next Level”

Here’s how the process works:

Preparation: Please fill out this application form and fax it to Flourish Press office. You may also overnight any and all marketing materials and documents that you feel will be helpful in defining the discussion. Tom’s office will schedule a time to discuss the process with you.

Qualification: Based on application, Tom will contact you for a initial evaluation. Be prepared to discuss the scope of your situation, the desired goals and outcomes of consulting, as well as a framework for If Tom feels there is a fit between what you need and what he can provide... and there is a strong chance of success, the process will be confirmed in a documented proposal. If your business needs are outside of his expertise or there is a sense that the fit is not appropriate, then Tom will decline and recommend other resources to you.

Acceptance: Upon acceptance, a simple agreement between both parties will be signed. Tom will also provide a mutual Non Disclosure Agreement as you will be revealing insider details about your company. The onsite consulting date will be agreed to. The agreement will set in motion a number of details including travel arrangements, pre-consulting questionnaires and more as required.

Implementation: Our work is collaborative, involving client personnel and resources and the transfer of skills to the client. The focus is the achievement of the agreed to objectives.

Celebration: Upon completion of the agreed to tasks, we celebrate the victory.

Terms

1. Flourish Press Inc. and Tom Adams agree to a comprehensive non-disclosure agreement.
2. Flourish Press / Tom Adams agree to function as the ultimate fiduciary, as a respected and trusted advisor with the responsibility and obligation to counsel as to what is in clients best interests in order to provide the best short-term and long-term outcomes.
3. Client agrees to work with Flourish Press under the following arrangement: No bullshit. Good fun. Meaningful work. Joint accountability. Open and honest feedback. Immediate payment as required.
4. Client agrees that success is a result of mutual and shared responsibility.



Contact Details:

Name:

Title

Company

Email

Direct Phone

Alternate Number (cell)

City/ State

Please answer all the following questions. All information will be held in strictest confidence.

Briefly describe your company and industry or market served.

What goods or services do you sell & approximate current yearly sales volume for each?

What are your current marketing and lead generation challenges? Why do you need help?



Ideally, what goal or result, if attained, would confirm this issue has been remedied? What would constitute success for you? Please define.

What would be different for you or the business if this process was successful?

How will you know when this objective has been accomplished?

What is important for Tom to know about working with you, your company? Are you willing to do the work necessary to change your business process? Please explain.

How soon do you want to begin this process?

Is there a package with all your marketing material and any related documentation to accompany this consulting request? If so, please confirm tracking number and Courier Company. Packages should be overnight to

Flourish Press,
3525 Del Mar Heights Road, Suite 383,
San Diego, CA 92130
Phone Number 800-450-5390

Please Fax this to 866.529.4749
Or email to mail@flourishpress.com

