



Disney Client Consultation Questionnaire

Thank you for choosing me as your Disney Travel Advisor!

Before our consultation call, please fill out the following worksheets. This will help me to guide our conversation and serve as a reference point for my planning!

Intake Form

NAME	DATE OF BIRTH
Where are you in the planning proce	ess?
What are your travel dates? Are they	flexible?
What airport do you prefer to depar	t from?
Who all is coming on this trip? Who vand accommodations?	vill be making final decisions about pricing, dates,
What parks are you hoping to experi	ence while you are in Orlando?

Disney Travel Goals

PRIMARY TRAVEL GOALS

Every family travels differently! Please take a few moments to fill out this survey and "paint the picture" of what your expectations, needs, hopes, and wishes are for this vacation!

01	Tell me the story and vision behind this vacation. Why Disney? Why right now?
02	Tell me about your favorite vacation you've ever taken as a family, and why it was your favorite?
03	Tell me about your least favorite vacation you've ever taken as a family, and why it was your least favorite.

About Your Family

What are your favorite activities to do together?	Have you taken a trip like this before?
What types of hotels and accommodations do you typically prefer?	What are the ages of everyone traveling?
Who is everyone's favorite Disney character?	How tall are your children?

Questionnaire

Does anyone coming on this trip have any mobility issues I should be aware of?
Does anyone coming on this trip have any dietary issue I should be aware of?
Does anyone coming on this trip have any social, emotional, or sensory concerns I should be aware of?
What budget do you have in mind for the entirety of your trip?
What is the most important memory or moment you would like to have happen on this trip?

Notes