

A grayscale background image showing two women, one older and one younger, looking down at something out of frame. The image is dark and serves as a backdrop for the text and form.

SKYLIT

Q'S ABOUT YOU

The more we know about you, your company goals and your personal dreams the more we can help you realize them. Please take this time to answer as many of the following questions as possible. It seems like a lot but you will see, in the end, all these little details will help you define your brand.

NAME:

COMPANY:

DATE:

GETTING TO KNOW YOUR BUSINESS

1. How would you describe your business? Summarize it in one word or sentence.

2. What part of your business are you passionate about? What is your mission/goal?

Number in order of importance for your business:

_____ Company Growth

_____ Legacy

_____ Personal Growth

_____ Profit

_____ Fame / Recognition

_____ Life / Work Balance

_____ Influence

_____ Philanthropy

_____ Other _____

3. What do you value most? What does your business value?

Who do you want to affect most as a result of your business and values? Number in order of importance.

_____ Family

_____ Business Affiliates

_____ Culture

_____ Community

_____ Education

_____ Quality of Life

4. Who are your customers? What do they care about?

GETTING TO KNOW YOUR BUSINESS CONTINUED

CURRENT Customer Demographics

Region	Nationality	Age
_____ % Local	_____ % Caucasian	_____ % 0–12
_____ % National	_____ % Hispanic	_____ % 13–25
_____ % International	_____ % Asian	_____ % 25–45
Gender	_____ % Middle Eastern	_____ % 45–65
_____ % Women	_____ % African American	_____ % 65+
_____ % Men	_____ % Other	

DESIRED Customer Demographics

Region	Nationality	Age
_____ % Local	_____ % Caucasian	_____ % 0–12
_____ % National	_____ % Hispanic	_____ % 13–25
_____ % International	_____ % Asian	_____ % 25–45
Gender	_____ % Middle Eastern	_____ % 45–65
_____ % Women	_____ % African American	_____ % 65+
_____ % Men	_____ % Other	

6. How would your customers describe your business? What are you best known for? What would you like to be best known for?

7. Why do your customers want your product or service? How do they benefit?

GETTING TO KNOW YOUR BUSINESS CONTINUED

8. What feeling or message do you want your brand to convey to your current and potential customers?

9. Who are your competitors? How do you differ from your competition? What makes you unique?

10. What is currently working for your company as a whole?

11. What is currently NOT working for your company as a whole?

12. Why do you want to _____? (e.g. brand your company, launch a website, etc.)
What is the motivation? What is the objective? What are the desired results?

13. What would you like to achieve this year? Over the next five years?

14. If we were successful beyond your wildest dreams what would that look like?

WORD ASSOCIATION

Check all that you would associate with your brand either currently or in the future.

<input type="checkbox"/> Abstract	<input type="checkbox"/> Fair	<input type="checkbox"/> State-of-the-Art
<input type="checkbox"/> Active	<input type="checkbox"/> Flexible	<input type="checkbox"/> Strong
<input type="checkbox"/> Adventure	<input type="checkbox"/> Friendly	<input type="checkbox"/> Subtle
<input type="checkbox"/> Affordable	<input type="checkbox"/> Fun	<input type="checkbox"/> Timeless
<input type="checkbox"/> Ambitious	<input type="checkbox"/> Generous	<input type="checkbox"/> Traditional
<input type="checkbox"/> Analytical	<input type="checkbox"/> Hip	<input type="checkbox"/> Trend-Setting
<input type="checkbox"/> Approachable	<input type="checkbox"/> High-End	<input type="checkbox"/> Trendy
<input type="checkbox"/> Artistic	<input type="checkbox"/> High-Profile	<input type="checkbox"/> Understated
<input type="checkbox"/> Big Business	<input type="checkbox"/> High-Tech	<input type="checkbox"/> Unpretentious
<input type="checkbox"/> Bright	<input type="checkbox"/> Inexpensive	<input type="checkbox"/> Upscale
<input type="checkbox"/> Bold	<input type="checkbox"/> Ingenious	<input type="checkbox"/> Vibrant
<input type="checkbox"/> Casual	<input type="checkbox"/> Informative	<input type="checkbox"/> Warm
<input type="checkbox"/> Classic	<input type="checkbox"/> Innovative	<input type="checkbox"/> Youthful
<input type="checkbox"/> Clean	<input type="checkbox"/> Inspirational	<input type="checkbox"/> Other:
<input type="checkbox"/> Colorful	<input type="checkbox"/> Knowledgeable	<input type="checkbox"/> _____
<input type="checkbox"/> Comfortable	<input type="checkbox"/> Literal	<input type="checkbox"/> _____
<input type="checkbox"/> Competitive	<input type="checkbox"/> Low Key	<input type="checkbox"/> _____
<input type="checkbox"/> Complex	<input type="checkbox"/> Low-Tech	<input type="checkbox"/> _____
<input type="checkbox"/> Conceptual	<input type="checkbox"/> Masculine	<input type="checkbox"/> _____
<input type="checkbox"/> Conservative	<input type="checkbox"/> Mature	<input type="checkbox"/> _____
<input type="checkbox"/> Contemporary	<input type="checkbox"/> Mechanical	<input type="checkbox"/> _____
<input type="checkbox"/> Cool	<input type="checkbox"/> Modern	<input type="checkbox"/> _____
<input type="checkbox"/> Corporate	<input type="checkbox"/> Multi-Dimensional	<input type="checkbox"/> _____
<input type="checkbox"/> Creative	<input type="checkbox"/> Mysterious	<input type="checkbox"/> _____
<input type="checkbox"/> Cutting Edge	<input type="checkbox"/> Orderly	<input type="checkbox"/> _____
<input type="checkbox"/> Current	<input type="checkbox"/> Organic	<input type="checkbox"/> _____
<input type="checkbox"/> Descriptive	<input type="checkbox"/> Organized	<input type="checkbox"/> _____
<input type="checkbox"/> Earthy	<input type="checkbox"/> Powerful	<input type="checkbox"/> _____
<input type="checkbox"/> Elegant	<input type="checkbox"/> Progressive	<input type="checkbox"/> _____
<input type="checkbox"/> Entertaining	<input type="checkbox"/> Realistic	<input type="checkbox"/> _____
<input type="checkbox"/> Established	<input type="checkbox"/> Reputable	<input type="checkbox"/> _____
<input type="checkbox"/> Evolving	<input type="checkbox"/> Secure	<input type="checkbox"/> _____
<input type="checkbox"/> Exciting	<input type="checkbox"/> Serious	<input type="checkbox"/> _____
<input type="checkbox"/> Experimental	<input type="checkbox"/> Simple	<input type="checkbox"/> _____
<input type="checkbox"/> Expert	<input type="checkbox"/> Sophisticated	<input type="checkbox"/> _____
<input type="checkbox"/> Experienced	<input type="checkbox"/> Stable	

GETTING TO KNOW YOU

1. List 5 brands you admire. Why do you admire them?

2. What is/are your favorite color(s)? What color(s) do you associate with your business?

3. What is your favorite shape, pattern or texture? Check all that apply.

- | | | |
|--|--|---|
| <input type="checkbox"/> Circle | <input type="checkbox"/> Florals | <input type="checkbox"/> Natural Materials |
| <input type="checkbox"/> Square | <input type="checkbox"/> Hi-Contrast | <input type="checkbox"/> Tribal / Primitive |
| <input type="checkbox"/> Triangle | <input type="checkbox"/> Bold Colors | <input type="checkbox"/> Free-form / Abstract |
| <input type="checkbox"/> Golden Ratio | <input type="checkbox"/> Low Contrast | <input type="checkbox"/> Organic |
| <input type="checkbox"/> Geometric / Organized | <input type="checkbox"/> Soothing Colors | <input type="checkbox"/> Smooth |
| <input type="checkbox"/> Stripes | <input type="checkbox"/> Hand Made | <input type="checkbox"/> Textured |

4. Symmetry or Asymmetry? Literal or Abstract?

5. What is your favorite kind of music? What is your favorite song?

What music/musician do you listen to when you want to be:

Creative _____

Happy _____

Calm _____

Energized _____

GETTING TO KNOW YOU CONTINUED

7. Would you rather travel to experience new things and people and or go on vacation to relax and get away?

Where would you go? Check all that apply.

- | | | |
|------------------------------------|---------------------------------|---------------------------------------|
| <input type="checkbox"/> Island | <input type="checkbox"/> Desert | <input type="checkbox"/> Wine Country |
| <input type="checkbox"/> Mountains | <input type="checkbox"/> City | <input type="checkbox"/> Other: _____ |

8. What do you enjoy doing when you have time off? Check all that apply.

- | | | |
|--|---|---------------------------------------|
| <input type="checkbox"/> Reading | <input type="checkbox"/> Dining | <input type="checkbox"/> Gardening |
| <input type="checkbox"/> TV/Movies | <input type="checkbox"/> Going Out | <input type="checkbox"/> Spa |
| <input type="checkbox"/> Computer/Social Media | <input type="checkbox"/> Marketing Events | <input type="checkbox"/> Hair/Nails |
| <input type="checkbox"/> Family Time | <input type="checkbox"/> Getting Outdoors | <input type="checkbox"/> Shopping |
| <input type="checkbox"/> Time with Friends | <input type="checkbox"/> Sports/Exercise | <input type="checkbox"/> Other: _____ |

10. What is your preferred clothing style? Check all that apply.

- | | | |
|---|--|--|
| <input type="checkbox"/> Professional / Corporate | <input type="checkbox"/> Preppy / Conservative | <input type="checkbox"/> On Trend |
| <input type="checkbox"/> Casual / Sport | <input type="checkbox"/> Hippie / Free Flowing | <input type="checkbox"/> Trend-setting |
| <input type="checkbox"/> Original / Unique | <input type="checkbox"/> Rock/punk/Goth | <input type="checkbox"/> Comfortable / Elegant |
| <input type="checkbox"/> High fashion / Brands | <input type="checkbox"/> Classic / Romantic | <input type="checkbox"/> Other: _____ |

10. Are you an animal lover? If so, what is your favorite?

11. What is your favorite season? Check all that apply.

- | | |
|---------------------------------|---------------------------------|
| <input type="checkbox"/> Fall | <input type="checkbox"/> Spring |
| <input type="checkbox"/> Winter | <input type="checkbox"/> Summer |

12. What is your favorite kind of food? Check all that apply.

- | | | |
|----------------------------------|-----------------------------------|---------------------------------------|
| <input type="checkbox"/> Italian | <input type="checkbox"/> Mexican | <input type="checkbox"/> Organic |
| <input type="checkbox"/> French | <input type="checkbox"/> Asian | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Seafood | <input type="checkbox"/> Homemade | |

13. What is your favorite sport to play or watch? Check all that apply.

- | | | |
|---------------------------------|--|---------------------------------------|
| <input type="checkbox"/> Golf | <input type="checkbox"/> Skiing/Snowboarding | <input type="checkbox"/> Baseball |
| <input type="checkbox"/> Surf | <input type="checkbox"/> Scuba Diving | <input type="checkbox"/> Dance |
| <input type="checkbox"/> Tennis | <input type="checkbox"/> Football | <input type="checkbox"/> Gym |
| <input type="checkbox"/> Yoga | <input type="checkbox"/> Basketball | <input type="checkbox"/> Other: _____ |

WHEW! YOU DID IT!

Branding, ultimately, is about reaching in and revealing the essence of what you love, what you believe in and why you do what you do. This questionnaire is just a fun start! So thanks for taking the time to fill it out!



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