*CIVIL WAR ROUND TABLE*

SPEAKER AGREEMENT

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Date of Speaking Engagement** | | | | | | | | **Location of Engagement** | | | | | | | | |
| **Speaker First Name** | | | | | | | | **Speaker Last Name** | | | | | | | | |
| **Address** | | | | | | | | **City** | | | | | **State** | | **Zip Code** | |
| **Email** | | | | | | | | **Cell Phone** | | | | | **Home Phone** | | | |
| **Title of Presentation** | | | | | | | | | | | | | | | | |
| **Description - PLEASE ATTACH (200 Words or less)** | | | | | | | | **Speaker Biography - PLEASE ATTACH** | | | | | | | | |
| **Hotel Name:** | | |  | | | | **Hotel Address:** | |  | | | | | | | |
| **Primary CWRT Contact Name:** | | |  | | | | | | **Cell Phone:** | | | | | | | |
| **Backup CWRT Contact Name:** | | |  | | | | | | **Cell Phone:** | | | | | | | |
| **Audio Visual Needs**  Computer  LCD Projector  Other (specify) | | | | | | | | **Do you agree the CWRT may record your presentation and use that recording at its discretion?**  Yes  No | | | | | | | | |
| **AGREED UPON EXPENSES** | | | | | | | | | | | | | | | | |
| Transportation: |  | Lodging: | |  | Honorarium: | |  | Food: | |  | Other: |  | | **Total:** | |  |
| **Terms & Conditions**  **TRANSPORTATION**  CWRT will reimburse transportation expenses as follows:   * If airfare required, CWRT will pay published fare for an advanced roundtrip ticket at the coach class rate from the speaker’s home area. Any and all upgrades shall be the responsibility of the speaker. * If motor vehicle, CWRT will pay roundtrip mileage at the reimbursement rate of (\_\_\_ / mile) to a maximum of $\_\_\_\_\_\_.   **LODGING**   * CWRT will notify the speaker the name and address of the hotel/motel it intends to use. If agreed upon, a lodging reservation for one night will be made and the rate prepaid. * If speaker desires a different hotel, the speaker will so notify the CWRT before the above reservation is made, notify the CWRT of the difference in rate and be responsible for the difference.   **SPEAKER GUESTS**   * CWRT will be responsible to pay for the dinner of the speaker and up to one guest. * No other meals will be paid than those on the CWRT dinner menu. * If speaker is accompanied by more than one guest, speaker will be responsible to pay the difference.   **HONORARIUM**   * CWRT will provide an honorarium of $\_\_\_\_\_ or make a donation in that amount to \_\_\_\_\_\_\_\_ in the name of the speaker to \_\_\_\_\_.   **ADDITIONAL EXPENSES**   * Reimbursement for any additional expenses not covered herein shall be negotiated with the appropriate CWRT representative 60 days prior to the speaking engagement date. * If agreed upon, CWRT will be responsible for those additional expenses contained in the attached addendum. Otherwise, the speaker will be responsible cover those additional expenses.   **MARKETING**   * Speaker agrees to forward a marketing photograph of the self within \_\_\_\_\_\_\_\_\_\_\_ days of the engagement. | | | | | | | | | | | | | | | | |
| **I agree to the above terms and conditions.** | | | | | | | | **I agree to the above terms and conditions.** | | | | | | | | |
| **Speaker Signature** | | | | | | **Date** | | **CWRT Representative Signature** | | | | | | **Date** | | |
| **PRINT Speaker Name** | | | | | | | | **PRINT Representative Name** | | | | | | | | |