SPEAKING ENGAGEMENT AGREEME	<u>ent</u>
CLIENT	
EVENT	
AUTHORIZED REPRESENTATIVE	
CLIENT ADDRESS	
AUTHORIZED REPRESENTATIVE (CELL PHONE EMAIL	OFFICE TELEPHONEFAX
	PRESENTATION TIMEPROGRAM LENGTH
ESTIMATED ATTENDANCE	PROGRAM LENGTH
	TATION [Full Address, Room Name or Number]
NEAREST COMMERCIAL AND PRI	VATE AIRPORT
Terms of Agreement	
required], and meals. One-half of the hon	which includes the cost of transportation, one night lodging [if norarium is required to confirm the speaking date and is to be returned with speaking honorarium is due the day of the speaking engagement .
	eaking honorarium is not receive at the time of speaking presentation, the m, and the contractee agrees to reimburse the cost of airfare and lodging for
	loss of income. Therefore, should client cancel the date, the deposit shall e to illness or unforseen emergency, deposit shall be refunded to the client.
Should speaker arrive by air travel client a and back to the airport.	agrees to provide transportation from the arrival airport to the hotel or event,
	ulate, record, broadcast, videotape or transmit the presentation in any form onsent of the speaker. Client understands that this may involve an additional
	a college, university, or high school, or business with a an employee le talk in a cafeteria, marketplace, or student union lobby.
letterhead and will also provide two refer	res to mail speaker a brief testimonial typed on company or association rals, including contact information, of other organizations who may benefit ocur within fourteen days of speaking engagement.
Please execute this agreement and return is your records.	it to within ten days of your receipt. Speaker will sign and return a copy for
The above is agreed to and accepted by [f	'ull name of sponsoring organization]
Authorized Signature	Date

Adventure Quest Productions

RETURN SIGNED FORM WITH DEPOSIT VIA USPS TO:

MR. JON HELMINIAK ADVENTURE QUEST PRODUCTIONS P.O. BOX MEQUON WI 53092

Speaker will not book date without signed form and deposit.