



Garden Club Federation of Massachusetts
400 Fifth Avenue, Suite 110
Waltham, MA 02451

PROGRAM CONTRACT

Lecturer

Lecturer Address

Lecturer Cell Phone

Email:

Program Subject/Title

Program Day/Date

Time

Meeting Place:

In person meeting **Yes or No**

Permission to record presentation Yes No

Permission to post on Garden Club Website Yes No

Handouts - Permission to post on Garden Club Website Yes No

On Garden Club Secured Member Only area on website Yes No

Special Needs	Provided by Lecturer	Provided by Club
# of tables needed		
Trash barrel		
microphone		
other		

FEE for Lecture \$

Mileage

Note: If the club is charged for plant material, we expect to own it. Containers to be raffled off to members. If your fee is over \$600 in one calendar year, you will be required to fill out a W-9.

We would appreciate your providing us with a brief description of your program along with a biography which might be used by us for an introduction as well as by our publicity chairperson.

We look forward to welcoming you to our club. Please fill in where necessary and return one signed copy.

Return signed contract to:

Attn:

Cell

Email

Lecturer Signature

Club Chairperson's Signature

Date