

Marcia Acker-Missall

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CONTRACT: please complete, sign & date and return one copy to me promptly.

Marcia Acker-Missall, teacher, is under contract with _____
(Your company or group name)

Address of responsible member/officer: _____

Phone _____ Fax _____

E-mail address _____ Web site address _____

Name & phone for Organization's planner/events officer _____ email- _____

Phone _____ & mailing address. _____

Class #1 _____ \$ _____
Title of workshop Date Fee

Class # 2 _____ \$ _____
Title of workshop Date.....
Fee.....

Class#3 _____ \$ _____
Title of workshop Date Fee

Total Fees due to teacher at time workshop is completed - \$ _____

Kit Fee for each student (price advised in advance) to be paid directly to the teacher on or before class - \$ _____

All Air/Ground transportation, meals, tolls, lodging and emergency expense if any to be reimbursed in full to teacher
\$ _____

Note: I am very agreeable to staying at the home of a club member in order to reduce club's expenses. I do request to be housed in a clean, smoke free environment with a private bath.

Any Specific needs and details agreed to with group for this workshop/s please state below:

Samples, workshop kits etc. shipped by request to contracting group of artist's work must be insured fully and paid for by contracting group and returned to artist in excellent condition.

Specify samples, kits, model dolls, etc. here:

If cancellation is one month or more from date event is to take place, any cancellation fees are the responsibility of the person or group contracting by spoken agreement and/or signed contract. Cancellation of 30 days or less, then group or individual is responsible for all fees as above and 50% of the contractor teaching & or speakers/lecturer fees.

Signed by instructor _____ date

Signed by contracting representative _____ date