

Jane A. Sassaman
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janesassaman.com

CONTRACT FOR SASSAMAN LECTURES AND WORKSHOPS

BETWEEN _____ AND JANE A. SASSAMAN
CONTACT PERSON: _____ PHONE: _____
GUILD _____
ADDRESS: _____
EMAIL: _____
WEBSITE: _____

**THIS AGREEMENT CONFIRMS THAT JANE SASSAMAN WILL
PRESENT :**

LECTURE: _____ FEE: _____
DAYS _____ DATES: _____ TIME: _____

WORKSHOP #1: _____ FEE: _____
DAYS _____ DATES: _____ TIME: _____

WORKSHOP #2: _____ FEE: _____
DAYS _____ DATES: _____ TIME: _____

All supply lists can be found at janesassaman.com

WORKSHOP REQUIREMENTS:

Cost: \$700 per day

Length: 6 hours

Student Limit:

All classes are limited to 20 students. However, you may be able to negotiate for up to 25 students, depending on the circumstances, for an extra fee.

Physical Requirements:

- Large projection screen
- Sturdy table for projector and laptop
- 2-3 quilt hangers or other safe way to display quilts
- 2 tables for teachers use
- 3-5 irons and ironing stations, electrical cords and extensions, multiple-outlet strip, adaptors, lighting (if necessary).

- Plenty of workspace for each student.

LECTURE REQUIREMENTS:

Cost: \$600

Length: 1 to 1 1/2 hour

Physical Requirements:

- Large projection screen
- Sturdy table for projector and laptop
- 2-3 quilt hangers or other safe way to display quilts
- 2 tables for teachers use
- 3 prong electrical cords

TRAVEL & HOUSING:

The Guild will pay for all travel expenses, including airline or train tickets and transportation to and from the airport. It is agreed that the Guild will provide Jane's single occupant hotel room and meals during the contract dates.

Payment is due at the jobs conclusion.

CANCELLATIONS:

The Guild may cancel a workshop or a lecture up to 3 months (90 days) before the date of the workshop or lecture. If the guild/conference cancels after this period the guild will be responsible for paying half the contract fees.

Guild/Conference Representative: _____

Address: _____

City, State, Zip: _____

Phone: _____ Fax: _____ Email: _____

Date: _____ Signature: _____

Please include information for a second contact person: _____

Teacher/Lecturer, Jane A. Sassaman: Date: _____

Signature: _____