**The Fairbanks Garden Club**

**DEDHAM, MASSACHUSETTS**

**PROGRAM CONTRACT**

**Presenter:**

**Address:**

**City:**       **State:**       **Zip:**

**Email:**       **Phone:**

**Program Subject/Title:**

**Program Date:**       **Time:**

**Meeting Place:** Endicott Estate, 656 East Street, Dedham, MA 02026. The building is a large off-white Colonial Revival. Parking is on the right side.

|  |  |  |
| --- | --- | --- |
| **Special Requirements** | **Provided by Presenter** | **Provided by Club** |
| Flowers |  |  |
| Projector |  |  |
| Screen |  |  |
| Podium |  |  |
| Extension Cords |  |  |
| Tables – quantity? |  |  |
| Table Covers |  |  |
| Other Items |  |  |
| Assistants – quantity?      At what time? |  |  |

|  |  |
| --- | --- |
| **Presentation Fee:** |  |
| **Mileage @** **/mile:** |  |
| **Charge for materials\*** (not to exceed      )**:** |  |
| **Total Fee:** |  |

**\*Note:** Any materials charged to the Club shall become property of the Club. An invoice, either prior to, or on the day of the program, is necessary for payment.

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 chair.

We look forward to welcoming you to our Club. If there are any questions or help we may give, please feel free to call the Programs/Workshops Chair.

**Please fill in where necessary and return one signed copy.**

**Date:**

**E-Signature:**

Please complete the Program Contract and email to:

Program/Workshop Chair:

Email:

Phone:

**The Fairbanks Garden Club**

**DEDHAM, MASSACHUSETTS**

**RELEASE FOR WEBSITE AND PUBLICATIONS**

Before sharing a name, information and/or photograph on our website ***fairbanksgarden.club*** or in a publication, The Fairbanks Garden Club (FGC) requires a signed release form from all adults and from the parent or legal guardian of any youth under 18.

I, (name)

being over 18 years of age, **hereby grant** The Fairbanks Garden Club the right to use my:

(Please CHECK the choices below that you agree may appear on the FGC website or in a publication.)

Name - Please print below, as you wish your name to appear:

Photograph

Biography

City, state and country (specific addresses *never* used)

Other:

I **do not** wish to have any of my above information appear on the FGC website or in a publication

**Date:**

**E-Signature**:

**Address**:

**City**:       **State**:       **Zip**:

Please complete the Release Form and email to:

Program/Workshop Chair:

Email:

Phone: