



SPEAKING AGREEMENT

Client/Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact person: _____

Phone #: _____

Fax #: _____

Email: _____

Web Site (for research purposes): _____

Date of engagement: _____ Time: _____

Length of Presentation: _____ Approx. Audience size: _____

Location of Engagement(s): _____

A deposit of 50% of the fee is due upon return of this confirmation.

The balance is payable on site the day of the performance.

Contact michaela@boostyourbottomline.com to finalize booking and payment.

Please make checks payable to Boost Your Bottom Line.

FEE: \$ _____

(Less Deposit): \$ _____

Total Amount Due On-site \$ _____

Holly George or Leslie Hamp

Date

Client

Date