

CAVEAT WORKSHOP CONTRACT

Organization _____

Address _____

Contact _____

Telephone _____ Fax _____ E-mail _____

Speaker _____

Topic _____

Audience _____

Audio Visual Requirements _____

Date of Presentation _____

Duration of Presentation _____

Total cost _____ Due Date _____

Cancellation Policy: Changes and cancellaions will be accepted up to 14 days in advance of presentation, with refund less 10% administrative fee. Changes made within 14 days will be subject to the full fee.

Authorization _____

Date _____