



Paula Reid  
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## DEALER CONTRACT

**This is to confirm that Paula Reid will present workshop(s) and/or lecture(s) for:**

Shop name: YOUR STORE NAME HERE

Contact Person: YOUR NAME HERE

Address: YOUR ADDRESS HERE

Phone: YOUR PHONE HERE

**To be held on (Date or Dates):** \_\_\_\_\_

**Lecture(s) and/or Workshop(s) Requested:** \_\_\_\_\_

**All workshops require a sewing machine for exclusive use by Paula for demonstrations.  
If other feet and/or accessories are needed, this will be discussed with you in advance.**

### **Fees for 2017:**

**Teaching:** \$650 for 1-day event for 6 hours

#### **Expenses to be paid by shop:**

**All travel costs** including air coach fare, tips, taxi, shuttle, car rental, gas, etc. These expenses will be divided equally among all participating shops. If travel is by my own car, IRS business mileage rate will apply.

**Lodging:** Shop will cover cost of lodging for this event.

**Meals:** Any meals not provided by either hotel or shop will be charged at the GSA Per Diem rate for the zip code where the event is held.

## **AGREEMENT**

**CANCELLATION POLICY:** On an extended trip involving multiple dealers, a cancellation by a shop will most likely result in Paula incurring hotel, travel and meal expenses as itemized above that would have been billed to your shop. Therefore, unless your contracted date can be filled by another shop, you will still be responsible for those expenses directly attributable to your cancelled event plus your portion of the shared expenses. If cancellation occurs within ten business days, you will also owe any expenses Paula has incurred for handouts, materials, etc., directly attributable to your workshop. \_\_\_\_\_ (Shop Owner Initials)

**All fees and expenses must be paid by check directly after the event(s) unless other arrangements are made in advance.**

**To hold the event dates as described in this contract, please send a deposit check of \$500 to Paula Reid at the address below.**

**I have read the above Contract and I understand and agree to the terms:**

**Name**

**Phone**

**Signature**

**Date**

**Return check and signed contract to:**

**Paula Reid  
3114 Tournament Drive  
Palmdale CA 93551**