

STEVE SWINBURNE AUTHOR VISIT CONTRACT

Thank you for booking a school visit!

Please verify and complete the following information, sign, and send this form back to me at: Steve Swinburne P.O. Box 2005, South Londonderry, VT 05155 Steve's cell: [802 375 4080](tel:8023754080)

SCHOOL NAME _____ DATE OF VISIT _____

VISIT START TIME: _____ VISIT END TIME: _____

SCHOOL ADDRESS _____ CITY _____

STATE _____ ZIP _____

SCHOOL TELEPHONE _____ SCHOOL FAX _____

SCHOOL CONTACT PERSON _____

CONTACT CELL PHONE: EMAIL: Time and Grade Level of Presentations:

PLEASE HAVE AVAILABLE: Large screen, cart with power strip, hand-held, wireless microphone with stand, extension cord, chair and large table up front to display materials, selection of my books, bottled water, and computer speakers.

THE AUTHOR WILL PROVIDE: Apple MacBookPro laptop computer, digital projector

EVENT HONORARIUM _____ Check made payable to: Steve Swinburne

EXPENSES PAID: _____

BOOK SALES INFORMATION If you decide to have a book sale, I'll be happy to supply you with all my titles—hardcovers are \$14 and most paperbacks are \$8. I can provide a book order form for handling book sales.

Book orders must be submitted to author at the above address 1 to 2 weeks in advance in order to have them available at the event. If child's name is provided on the order form, Steve will sign the book, inscribed to the child.

Signed: _____ Date: _____

School Representative Sign and Date Below:

Signed: _____ Date: _____