



Where Another Point of View Makes a Better You.

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 via one of the following methods:

- **Amber Housey, 3475 Dorothea Ct., Troy, MI 4808**
- Send a PDF via email to ahousey3@aol.com

SCHOOL/ORGANIZATION NAME: _____ DATE OF VISIT: _____

TOTAL VISIT START TIME: _____ TOTAL VISIT END TIME: _____

GRADE or AGE LEVELS: _____ START TIME: _____ END TIME: _____

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GRADE or AGE LEVELS: _____ START TIME: _____ END TIME: _____

SCHOOL/LOCATION ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

SCHOOL/ORGANIZATION TELEPHONE: _____ FAX: _____

TEACHER'S/ORGANIZER'S NAME(s): _____

TYPE OF EVENT: Author Visit - Presentation, book reading, meet and greet with students.

PLEASE HAVE AVAILABLE:

- Screen and projector available for a powerpoint presentation
- Microphone available in a large room setting.

THE AUTHOR WILL PROVIDE: Visual Aides, ipad keynote presentation, cord for connection to ipad, giveaways and the signed books for the pre-orders.

Agreed fee of _____ for the visit will be paid at the time of the visit.

Check made payable to: **Flip Side Stories, LLC** Fed ID #



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CONTACT PERSON: _____ TITLE: _____

WORK PHONE: _____ CELL PHONE: _____

EMAIL: _____

BOOK SALES INFORMATION Contract:

Author will provide a pre-order form to use for handling book sales. Pre-order files are also available at <http://www.theflipsidestories.com/visits.html>. If you are able to send the order forms to the author before the visit, she will sign them and personalize before the visit, otherwise she will sign them before during and after.

Other books will be provided for sale on the day of the visit.

Book orders (how many books needed) must be submitted to author at the above address or email one week before the event in order to have them available at the event (unless otherwise arranged).

If child's name is provided on the order form, author will sign the book, inscribed to the child unless otherwise noted on the form.

Signed: _____ Date: _____

Representative Sign and Date Below:

Signed: _____ Date: _____