## FLOWER SHOW SCHOOL OR SYMPOSIUM INSTRUCTOR'S CONTRACT

CITY, STATE:_____ COURSE # OR SYMPOSIUM:_____

LOCATION: (BUILDING OR ADDRESS)_____

SPONSOR:_____ COURSE/SYMPOSIUM DATES:_____

TEACHING DATES:_____ INSTRUCTOR SET UP DATE/TIME:_____

**Subject #1**_____ **Title**_____ **Hours** _____

**Subject #2**_____ **Title**_____ **Hours** _____

INSTRUCTOR'S FEE**: Main Subject Fee:**_____ **Second or Allied Subject Fee:**_____

TRANSPORTATION: **Air Fare or Mileage:**_____

HOSPITALITY: **Lodging: (Private home or hotel)** _____ **Number of Nights:**_____ **Meals:** _____

REIMBURSABLE EXPENSES: **Flowers, Shipping, Mailings, Other : (list)** _____
_____

INSTRUCTOR PROVIDING EXHIBITS FOR DEMONSTRATION WILL REQUIRE STAGING AS FOLLOWS:_____
_____

INSTRUCTOR WILL PROVIDE THE FOLLOW ING PAGES FOR DUPLICATION : **Student Outline pages _____, Examination Pages _____, P oint Scoring P ages (Oral) _____ (W ritten) _____, Others (Please list. May need to be at Instructor's Expense** )
_____

*Note: If these are not copied from the Instructor's Master copy after the Area Accrediting Chairman's approval, each changed copy must be sent to the Instructor for approval prior to duplicating and starting the course/symposium.*

LOCAL COMMITTEE WILL PROVIDE THE FOLLOWING:

1. **Assistance in unloading/unpacking, setting up, dismantling, reloading.**
2. **Exhibits - 3 for each of the 2 classes, for both oral and written point scoring as designated on Instructor's point scoring sheets. Complete instructions for staging specified by Instructor by letter/e-mail closer to the function's date. In Course I the Instructors will select the class to be used for Practice Written Pt. Scoring.**
3. **Lavaliere microphone, lectern, wastebasket, containers with water.**
4. **Other needs** _____

***NOTE: A copy of the completed contract should be given to the Local Chairman.***
***The time for the Master Panel judging must be immediately before the oral point scoring and later with the students***.

_____ _____
**Flower Show Schools or Symposium Chairman Signature** **Instructor Signature**

**Print Name:**_____ **Print Name:** _____

**Address:**_____ **Address:**_____

_____ _____

**Phone:**_____ **E-Mail:**_____ **Phone:**_____ **E-Mail:**_____

**Date Contract is Signed:**_____ **Date Contract is Signed:**_____