



Compensated Speaker Form Laramie County Master Gardeners

Master Gardener: _____ Date: _____

Project: _____

Speaker Information:

Name: _____

Address: _____

Phone: _____

SSAN or EIN (if compensation \$600 or more): _____

I. Engagement

a. Topic: _____

b. Date and Time: _____

c. Location: _____

II. Compensation

As consideration for services to be rendered by Speaker under this Agreement, Laramie County Master Gardeners (LCMG) shall provide the Speaker a stipend of \$ _____ (stipend includes Speaker honorarium, if any, as well as reimbursement of all Speaker expenses including travel). No additional compensation of any kind shall be made to Speaker.

III. Performance

Speaker shall present the session(s) set forth in this Agreement and agrees that every reasonable effort has been made to ensure all content and materials presented by Speaker acknowledges sources and does not infringe or violate any copyright, trademark, patent, or intellectual property rights of any person or entity.

IV. Independent Contractor Relationship

Speaker is an independent contractor; LCMG has no employees.

V. Cancellation

LCMG may cancel any session, change the length or size of any session, or change the place of any session at its discretion with minimum notice (weather is always a factor). In the event of cancellation, LCMG shall not be liable for any expenses, cost or damages incurred by the Speaker for those reasonable expenses incurred and not recoverable. If Speaker desires to cancel, LCMG requests thirty (30) days written notice (email to address below) of cancellation prior to the scheduled session.

Return completed form by [Date] _____ to email: treasurer@lcmg.org

Or print and mail to: LCMG Treasurer, P.O. Box 2540, Cheyenne, WY 82003

Check # _____

Date: _____