 **New Hampshire Orchid Society**

 **Program Speaker Information Checklist**

The purpose of this checklist is simply to clarify the expectations and responsibilities of all parties. This written checklist represents the expectations between the New Hampshire Orchid Society and:

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| Name:  |
| Address:  |
| City/State/Zip:  |
| Telephone Number:  |
| Cell phone Number: |
| Email Address:  |

**Program Information**

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| Program Date: |
| Program Title:Will the speaker be bringing plants, are there pre-orders, is there a discount, is there a due date orders must be placed? |
| Equipment requirements (projector, screen, etc.): |
| Housing requirements Host housing or Hotel (max allowed $125.00 with receipt):  |
| Special Considerations: If staying with host are there any special arrangements or health affecting conditions that the host needs to be aware of. |
| Expenses include: Speaker fee, transportation (includes but not limited to: airline, rental car, personal car, gas, Hotel/motel - $125.00 is the maximum amount the society will pay for overnight lodging. (Expenses with a receipt must be presented to the Treasurer before Speaker will be paid. Special Note: NHOS will pay for gas used but not for mileage.)Speaker Fee: Transportation expense (car and plane): Lodging expense: Gas Expense: Total approximate expenses:  |

(Copies of all expenses will be submitted to the Treasurer prior to the Speaker being paid.)

**Signature**

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| NHOS Program ChairSignature Date |