



Delta College

Speaker / Entertainer / Author / Presenter (SEAP) - Agreement, Fees, and Honorariums

This contract is for personal services by and between Delta College, 1961 Delta Road, University Center, MI 48710, and the speaker, presenter, author, musician, or general entertainer as listed below.

Section 1: To be completed by Delta College (please print legibly)

Name of individual or group providing service:	
Type of engagement (lecture, performance, etc.):	
Location of services to be performed:	
Purpose/Name of event:	
Date of engagement:	
Time of engagement (from start to finish):	
Total fee agreed upon (including all expenses):	
Delta College Contact Person:	

Section 2: To be completed by Speaker / Entertainer / Author / Presenter (all fields required – please print legibly). A copy of the current W9 form must also be attached.

Print Name as it appears on W9:	
Mailing Address (for payment):	
City, State, Zip:	
Phone:	
Email:	

Initial Each	Certifying Statements
	I accept that full payment of the aforesaid services shall be made at the completion of this engagement, and will be mailed within ten days of stated performance to person/group identified within this agreement.
	Individual/group is fully insured and will assume complete responsibility for his/her actions or his/her employee's actions while engaged in the services agreed to in this contract.
	This agreement to perform services is subject to proven detention by sickness, accidents, riots, strikes, epidemics, acts of God, or any other legitimate conditions beyond our control.
	I am an independent contractor, and therefore, I am responsible for my own Federal Income Tax. <i>I have attached my current W9 form</i> and acknowledge that the Taxpayer Identification Number (TIN) number provided is correct. (IRS W9 form is available at https://www.irs.gov/pub/irs-pdf/fw9.pdf .)

Signature of Speaker, Entertainer, Author, or Presenter

Date

This form, once completed by the speaker, author, entertainer, or presenter, should be returned directly to your contact person at Delta College.

Section 3: To be completed by Delta College Business Services:

Date Received:		Notes:
TIN Matched:		
Recorded/logged:		
Voucher #/Date:		
Emailed to SEAP/Dept:		Approved by Business Services: