

Workshop Host Letter of Agreement



The Parties

This Letter of Agreement is *between* the **Workshop Host**

Organization _____ Contact _____

Street _____ City _____

Province _____ Postal Code _____ Tel () _____ Fax () _____

and **WildBC** _____ Email _____

The Agreement

The Workshop Host agrees to the following:

1. Workshop Title _____ 2. Workshop Date _____
3. Cancellation Date (No later than one week prior to workshop date) _____
4. The minimum number of workshop participants is 15. Pay for a minimum of 15 participants for workshops proceeding beyond the cancellation date regardless if there are 15 participants or not.
5. The workshop fee is \$25 per person except Project WET which is \$30 per person.
6. Provide the minimum of three weeks notice from the booking date to workshop date. Workshop requests less than three weeks notice are subject to the Workshop Host paying for shipping of materials.
7. Be responsible for the recruitment of participants to the workshop with less than six weeks notice from workshop date. WildBC will assist with workshop recruitment when workshop booking is requested with six weeks or more notice from workshop date.
8. Workshop resource materials, including activity guides, are to be distributed only to participants present at workshop even if the Workshop Host is paying for the 15 participants' minimum workshop charge. Additional materials shall be returned to the Wild BC office.

WildBC agrees to the following:

1. The cost of delivery of workshop materials provided notice of workshop is given three weeks in advance of the workshop date;
2. Providing a workshop facilitator;
3. Assisting the Workshop Host with workshop participant recruitment and workshop advertising so long as there is six weeks notification prior to workshop date.

Workshop Host Signature _____ Date _____

WildBC Signature _____ Date _____

Method of Payment for Workshop Fees (due upon completion of workshop)

Cheque or money order enclosed (Payable to the Habitat Conservation Trust Foundation)

Visa MasterCard

Card Number _____ Expiry Date _____

Cardholder's Name _____ Phone Number _____