



by Deb DiSandro

Speaking Agreement

Please complete this form and mail to the enclosed address

(Client and/or Organization) _____ agrees to retain the speaking services of Deb DiSandro to deliver a presentation for _____ (Event)

Date: _____

Program Time: _____

Program Title: _____

Location: _____

Professional Fee: _____ Make Payable to: Slightly Off

Deposit: _____ 50% of the above fee to be mailed with this agreement. Remainder to be paid in full on the date of the event.

This constitutes the agreement between the parties:

By: Deb DiSandro

Co: Slightly Off

Title: President

24730 Illini Dr. Plainfield, IL 60544

815-439-1172

Date:

Signature:

By: _____

Co: _____

Title: _____

Address: _____

Phone: _____

Date: _____

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