

Seminar Agreement

Sponsoring Organization: _____

Date of Speaking Engagement: _____

Time of Speaking Engagement: _____

Name of Course _____

Deposit

When returned with a non-refundable \$1000.00 deposit, this document engages Tony Soileau, DDS for the above speaking engagement.

Honorarium

A check for \$_____ which constitutes the remaining sum of his honorarium will be issued to Dr. Tony Soileau before he departs back to Lafayette, Louisiana.

Course Curriculum

____ Lecture Only ____ Hands On Only ____ Lecture and Hands On

For descriptions of the different courses available from Dr. Soileau, please refer to his website; www.tonysoileau.com All course can be tailored to individual seminars.

This agreement is a commitment between [sponsoring organization] and Dr. Tony Soileau to provide an educational program at the time/date stated above. Both parties have agreed to the title listed above and the educational format stated above. [Sponsoring organization] is responsible for contacting Dr. Soileau to clarify the subject matter to be covered during his program within 30 days of signing this agreement. Dr. Soileau agrees to cover the agreed upon subject matter to the best of his ability and experience. [Sponsoring organization] may reschedule program up to 90 days before [date of engagement] without lose of deposit provided a new date is rescheduled immediately. Cancellation of the program within 30 days of the agreed upon date will require [sponsoring organization] to pay Dr. Soileau of the agreed upon honorarium.

Travel

The honorarium for this training will **not** include round trip coach airfare to the seminar destination, all transportation, and lodging. Payment for airfare, lodging, and transportation, will be paid for by the [sponsoring organization]. A credit card number will be required from the [sponsoring organization] for flight arrangements to be made by Dr. Soileau. **Dr. Soileau will not pay for his flights with his personal credit card.** Upon receiving the credit card number Dr. Soileau will secure his coach fare flights. The sponsor will make hotel reservations for Dr. Soileau, having his own room for the night prior to and during the speaking dates. Any incidentals charged to the room will be the responsibility of Dr. Soileau. When flight and lodging arrangements have been confirmed and Dr. Soileau has received a non-refundable deposit, this agreement will secure the seminar/training date listed above.

Additional Expenses

The following expenses are also to be paid for by the [sponsoring organization]:

- Room rental for training if needed
- Audiovisual and equipment if needed
- All meals during training session
- All handouts/course material

Stephanie Berrard will serve as the liaison between Dr. Soileau and [sponsoring organization]. They may be contacted at 337-234-3551 or steff@smilesbysoileau.com. Please return this agreement to 1144 Coolidge Blvd. Suite D Lafayette LA or fax to 337-234-5389.

Tony Soileau, DDS

Date

Sponsoring Party

Date