



Thank you for inviting Dr. Teresa Hairston to speak at your event!

In order to make our communication as clear as possible, here are some guidelines and suggestions. If you have any questions please do not hesitate to give us a call. Dr. Hairston is excited about sharing with you!

Upon completion of Dr. Hairston's services we request one (1) audiotape and one (1) DVD of each event at which Dr. Hairston speaks (where possible). Should these items not be available immediately, please mail to 700 Suttles Dr, Atlanta, GA 30331 (770) 866-2427.

Organization inviting Dr. Hairston: \_\_\_\_\_

Contact person for Organization: \_\_\_\_\_

Contact #/email for Organization: \_\_\_\_\_

Name of event: \_\_\_\_\_

Date of event: \_\_\_\_\_

Event theme: \_\_\_\_\_

Time of event: \_\_\_\_\_ Admission/Registration to event: \_\_\_\_\_

Venue at which event will be held: Name \_\_\_\_\_

Venue Address: \_\_\_\_\_ Venue phone#: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

At what time will Dr. Hairston speak? \_\_\_\_\_ What is the attire? \_\_\_\_\_

Length of time allotted for Dr. Hairston to speak: \_\_\_\_\_

What type of microphone will be available? \_\_\_ Lavalier (\*preferred) \_\_\_ Hand held

What type of recordings will you make from this session? \_\_\_ Audio \_\_\_ Video

Will recordings from the event be sold to the public? \_\_\_ Yes \_\_\_ No

Will the event be aired on Television? \_\_\_ Yes \_\_\_ No Network \_\_\_\_\_

make your vision reality

Hairston upon arrival at the hotel.

Hotel name: \_\_\_\_\_

Hotel address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Hotel phone: \_\_\_\_\_ Hotel fax: \_\_\_\_\_

Hotel confirmation number(s) \_\_\_\_\_ / \_\_\_\_\_

Distance from hotel to event \_\_\_\_\_ miles

Distance from hotel to airport \_\_\_\_\_ miles

Distance from airport to event \_\_\_\_\_ miles

### **HONORARIUM**

We will do everything possible to work within your budget. However, a modest honorarium will be expected for each speaking engagement. Please indicate the following:

Number of people you expect to attend the event: \_\_\_\_\_

Budgeted speaker compensation for Dr. Hairston: \_\_\_\_\_

Please submit fifty percent (50%) of budgeted speaker compensation at least three weeks prior to the event. Make checks/money order payable to "Teresa Hairston." The balance should be paid in money order at the completion of the speaking engagement to Teresa Hairston.

### **AIR TRAVEL**

Dr. Hairston's office must approve all travel schedules to avoid conflicts. Please provide via email, options of flight scheduled for Dr. Hairston. Inviting organization must pay for Flights/hotels. Dr. Hairston requests one non-stop (1) air ticket for Dr. Hairston (please purchase first class when flight time exceeds two hours).

Please check flight departures/returns to Atlanta, however, there may be a change in this depending on Dr. Hairston's schedule.

Preferred air carrier: Delta Airlines.

Preferred Hotel: Four or five star, full service.

\*Please note that in every instance it is our desire to work with your organization to minimize travel expenses. Please allow adequate time in finalizing all details to facilitate this.

*Outbound Flight information: (please insure that Dr. Hairston's office approves this!)*

*Airline \_\_\_\_\_ flight # \_\_\_\_\_ time of departure \_\_\_\_\_ am/pm*

Time of arrival \_\_\_\_\_ am/pm

Return Flight information

Airline \_\_\_\_\_ flight# \_\_\_\_\_ time of departure \_\_\_\_\_ am/pm

**TRANSPORTATION**

For airport pickup, please have driver/representative meet Dr. Hairston at baggage claim holding a sign that says T. Hairston. For hotel pickup, please have driver/representative call Dr. Hairston's hotel room 15 minutes before scheduled pickup. Because flights are sometimes unpredictable, we ask that you monitor outbound flight and arrive at the airport in plenty of time.

Name of transportation company /driver \_\_\_\_\_

Contact numbers: office \_\_\_\_\_ / cell \_\_\_\_\_

**PRODUCT SALES**

Dr. Hairston would very much appreciate having a product table available for sales as well as two people to assist with sales. If there is any venue cost for such, please ensure that the sponsor will absorb such costs. Product will be sent prior to Dr. Hairston's arrival. Please provide the following:

One (1) six foot table.

Two (2) representatives from your ministry to assist in selling.

Name/contact cell #s of those who will assist:

1. \_\_\_\_\_ / \_\_\_\_\_
2. \_\_\_\_\_ / \_\_\_\_\_

Thank you in advance for your cooperation

*Please note: as a courtesy, our office will double-check all air, ground and hotel reservations prior to Dr. Hairston's scheduled departure for your event. If for any reason approved and agreed upon arrangements cannot be confirmed, this will be an indication of your intent to cancel Dr. Hairston's appearance.*