



CATEGORY III LIMITED AUDIENCE PROGRAM SPEAKERS BUREAU REQUEST FORM

For NHC Use Only
HRC Number _____
Date _____

This request form must be filled out completely—including signatures. There is a TWO program per calendar year limit for each organization and/or target audience. For first program include processing fee of \$50 or \$75 for high-use speakers (Dale Clark, Darrel Draper, Charlotte Endorf, and Chris Sayre). For second program include processing fee of \$100. In addition to the processing fee, your organization is responsible for 50% of program cost, which will be determined by the NHC office.

ORGANIZATION NAME: _____

Address: _____ County: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail (if checked regularly): _____

PROJECT DIRECTOR NAME: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Day Phone: _____ Cell Phone: _____ Evening Phone: _____

E-mail (if checked regularly): _____

WHERE WOULD YOU LIKE YOUR MATERIALS SENT? Organization: Home:

SECOND CONTACT PERSON NAME: _____

Day Phone: _____ Cell Phone: _____ Evening Phone: _____

PROGRAM INFORMATION

Program Title from HRC Catalog: _____

Presenter: _____

Date: _____ Time: _____

Location: _____ Maximum Occupancy: _____

HAVE YOU CONFIRMED DATE AND TIME WITH SPEAKER? YES NO

This section to be filled in by the NHC office.

Speaker Honorarium \$ _____
 (Based on round trip mileage for speaker. A \$75 per diem has been added to the two categories with the most travel.)
 99 miles or less = \$125
 100-199 miles = \$150
 200-399 miles = \$175
 400-599 miles = \$275
 600 miles and over = \$300

_____ Round trip miles @ \$.37 per mile \$ _____

TOTAL PROGRAM COST \$ _____

NHC PORTION (50% of total) \$ **Sponsor portion (50% of total)** \$

Describe the audience you intend to reach:

Describe your goals/vision for this program:

I ASSURE THAT MY ORGANIZATION WILL:

- Acknowledge the NHC funding in all print materials, media interviews, and at the beginning of the presentation,
- Pay the speaker on the day of the program and accept responsibility for 50% of program expenses (the NHC sends out checks on the 15th and 30th of each month),
- Not charge a fee for the program (may charge for meals),
- Not use program for fundraising,
- Notify NHC and speaker immediately of any changes concerning the program (including cancellations), AND
- Submit a final report within 10 days after the completion of the program.

I CONFIRM THAT:

1. The organization requesting this program is a not-for-profit entity.
2. I have read and understand the policies and procedures set forth by the NHC office for this category. (These are located on the NHC website at: <http://www.nebraskahumanities.org>)
3. I understand that failure to comply with the above assurances may jeopardize my organization's eligibility for future programs and/or funding.

Project Director's Signature

Organization Legal Representative's Signature

Date

PLEASE RETURN FORM AND MAKE CHECK OUT TO:

NEBRASKA HUMANITIES COUNCIL
215 CENTENNIAL MALL SOUTH, SUITE 330
LINCOLN, NE 68508

DEADLINE: MINIMUM OF ONE MONTH BEFORE THE PROGRAM DATE