



## GUEST CONTRACT

633 College Avenue • Lancaster, PA • 17604  
717-291-4244 • 717-358-4679 (fax)

**FULL NAME**

**ADDRESS**

**TELEPHONE**

**EMAIL**

**SOCIAL SECURITY NUMBER**

**TAX ID NUMBER** (if charging to a business entity)

Note: You will also have to fax us your I-9 form

**DATE AND TIME OF EVENT**

I, \_\_\_\_\_, agree to give a presentation at the Philadelphia Alumni  
Writers House on \_\_\_\_\_ for the agreed upon honorarium of \_\_\_\_\_.

**ADDITIONAL INFORMATION:** Please check all that apply and describe briefly

I will need overnight accommodations in Lancaster

I have made travel arrangements

I will need technology for my event

I have a publicity photo and official bio (Please email to [ellen.brown@fandm.edu](mailto:ellen.brown@fandm.edu))