

AGREEMENT

This is an agreement between the WTSBOA and _____ referred to as the Conductor/Clinician in this agreement. The Conductor/Clinician agrees to direct rehearsals and conduct the All-West TN _____ in concert. The clinic dates are _____ beginning Thursday and ending with the concert on Friday/Saturday. The exact rehearsal times are to be specified in a separate letter of information.

The WTSBOA agrees to pay an honorarium of _____ payable at the completion of the concert. Automobile travel expenses will be reimbursed at the current state rate per mile/per trip. Air travel will be paid if needed and must be arranged through the Secretary/Treasurer. All hotel expenses will be paid by WTSBOA. Meals will be reimbursed at a rate of \$35 per day, including meals taken en route. WTSBOA further agrees to pay any reasonable and customary expenses incurred by the Conductor/Clinician (i.e. telephone, postage, etc.,). Other expenses incurred in connection with this event but not specified above may be submitted to the Secretary/Treasurer for reimbursements, but will be subject to approval by the WTSBOA Executive Committee.

Signed: (Conductor/Clinician) _____ Date _____

(WTSBOA President-Elect) _____ Date _____