**ATD TULSA PROFESSIONAL DEVELOPMENT PROGRAMS**

**SPEAKER AGREEMENT**

**Speaker / Presenter Information**

|  |  |
| --- | --- |
| **Primary Presenter Name** |  |
| **Co-Presenter Name** (if any) |  |
| **Workshop Title** |  |

**Please complete the below based on the primary presenter.**

|  |  |
| --- | --- |
| **Phone** | **Primary#: Co-presenter#:** |
| **Email Address** |  |
| **Title** |  |
| **Company or Organization** |  |
| **Mailing Address** |  |
| **City, State, Zip** |  |

**Statement of Understanding**

By signing this proposal information sheet:

1. I acknowledge that if my proposal is accepted by ATD Tulsa, I will provide workshop speaking services *pro bono publico* in support of the goals and objectives of ATD Tulsa.
2. I agree to indemnify and hold ATD Tulsa harmless from any liability.
3. I agree to refrain from using any portion of my (our) workshop presentation as a platform to promote products or services, solicit funds or take political positions.
4. I agree to convey my (our) remarks without bias toward race, gender, religion, political party, ethnicity or sexual orientation.
5. I agree to allow ATD Tulsa to video record my session, with recording made available to registrants.
6. I agree to grant ATD Tulsa permission to use video and/or still images taken of me during the event in any and all publications, including website and social media, without payment or any other consideration in perpetuity.
7. I agree that submitting this proposal for conducting a workshop for ATD Tulsa indicates agreement to comply with the guidelines and expectations stated in the RFP.

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**Signature of Proposed Presenter Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Proposed Co-Presenter Date**

ATD Tulsa Programs Workshop Speaker Agreement Revised 03/09/2022