

## NAME CREATE GIFT & GAB AGREEMENT

Create Gift & Gab Agreement for << Presenter Name>> << TITLE OF GIFT & GAB>>

By agreeing to provide a Gift & Gab for the NAME CREATE platform, I acknowledge I will abide by the following terms:

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<ol> <li>2.</li> </ol>	number of guests up to my maximum number. I understand that I am responsible for shipping my Gift & Gab gifts to the registered guests a minimum of <b>15 days</b> prior to the Gift & Gab presentation date. I will provide proof of shipment and tracking numbers for all packages to the NAME office for reimbursement after the Gift & Gab has been held.				
3.					
4.	I understand that the payment I receive will be the cost of the gift plus shipping costs charged to the guest. All payment to presenters will occur no later than six (6) business days after close of the Gift & Gab provided NAME has received proof of shipment and link to video provided to guests. My shipping fees are as follows:				
	\$ shipping USA (Continental)				
	\$ shipping Canada				
	\$ shipping to other countries I will not ship to the following countries (e.g., you may choose not to ship to the UK due to the UK Vat regulations)				
5.	My deadline for acceptance of participants is (date must be a minimum of <b>15</b> days prior to Gift & Gab presentation date).				
6.					
7.					
	Ose your own Zoom account				



- 8. By signing this Agreement, you agree to permit NAME to store the video on the NAME Vimeo site for a minimum of six (6) months after the date of the end of the Gift & Gab for use by you and your guests whether using NAME or your own Zoom account to record. NAME will not use the video for any reason other than distribution to the guests unless noted below. If the NAME Zoom account is used NAME will send you a video link within 5 days of Gift & Gab for you to email to your guests. If your Zoom account is used you agree to provide the link to your video to your guests within 5 days of receiving access to upload the video from your Zoom account.
- OPTION--- I grant permission to NAME to use my video as an educational tool on the Create platform after my initial presentation. Instructors have no obligation to provide gifts or address questions from any potential viewer accessing these free videos.
   Please sign if you agree to this option

If you do not want to participate in this option, please circle NO I DO NOT WISH TO PARTICIPATE

- 10. NAME will work with you to schedule the date and time for your Gift & Gab. The date, time, and Zoom Gift & Gab link will be sent with the presentation information to each guest by you. This link is not to be shared to anyone that is not a paid registrant of the Gift & Gab offered.
- 11. A \$25 non-refundable CREATE fee must be included with this Agreement.
- 12. Should I be unable to present my Gift & Gab due to a last-minute hospitalization or death of an immediate family member, I shall notify the NAME Office and CREATE Gift & Gab Chair. (Immediate family is defined as parent, spouse, partner, son, daughter or family member residing within the home.) I understand that the Create Gift & Gab Chair will work with me to re-schedule the Gift & Gab date if at all possible to avoid cancellation. Total cancellation will result in the full CREATE Fee charges. Should a guest cancel the order for the Gift & Gab prior to shipping due to the presenter not being available to teach at the intended time, a full refund shall be granted to the guest. No refunds will be given for already shipped gifts. No substitute presenter shall be designated to present the Gift & Gab.

I have read and understand the instructions listed above.					
Accepting Presenter's Signature	Date				

## **DEADLINE FOR ONLINE GIFT & GAB AGREEMENT AND \$25 FEE IS (\_DATE\_)**

₩ V7SA	MasterCard	<b>PayPal</b>	
Signature for Credit card use _			

You may send PayPal payment to <a href="mailto:name@miniatures.org">name@miniatures.org</a>. Please put "Create Gift & Gab Fee" in the memo. Your agreement must be submitted via email to Kim at <a href="mailto:kim@miniatures.org">kim@miniatures.org</a>. If paying via credit card, call NAME at the number at the bottom of the page. You will be required to provide your Social Security number as well for tax purposes.

NAME - Create PO Box 69 Carmel, IN 46082 name@miniatures.org Phone 317-571-8094