

LONG BEACH PUBLIC LIBRARY

111 West Park Avenue, Long Beach NY 11561 – Info: 432-7201

Engagement and Arrangements Form

Date: _____

The following is a confirmation of the engagement. Details of the arrangements shall be finalized following the Library's receipt of this completed and signed form. Said form must be received by the Library at least two weeks prior to the engagement.

PERSON OR GROUP: _____

PROGRAM: _____

DATE OF APPEARANCE: _____ **TIME:** _____

PLACE: Long Beach Public Library - 111 West Park Avenue, Long Beach, NY 11561

Note: The Library hours on Sundays are 1 p.m. - 5 p.m. - Tel: (516) 432-7201

Auditorium Doors will be open to the public 30 minutes prior to the beginning of the program. Please arrive early to set up.

FINANCIAL ARRANGEMENTS: FEE: \$_____ Please submit a bill with your Social Security or Tax I.D. Number. No check can be issued without a bill and Social Security or Tax I.D.# and a completed and signed W-9 form.

Please note: We will make every effort to compensate you in a timely fashion. However, we do not guarantee payment on the date of your performance. In order to process your check, we must receive a signed contract, a signed W-9 form and a signed Indemnity Form as soon as possible.

PLEASE NOTE: NO PROGRAM PRESENTER SHALL SELL, OR SOLICIT FOR, A PRODUCT OR SERVICE IN CONNECTION WITH THE PRESENTATION OF A LIBRARY PROGRAM.

Please be advised that, as an independent contractor, you do not qualify for any benefits provided to the regular staff of the Long Beach Public Library.

Length of program? _____

Will you need to schedule rehearsal time? Yes _____ No _____ Call 432-7201 to schedule.

Room Set up: chairs facing platform _____ in a circle _____ Other _____

The staff of the Library may not be able to introduce your program; if this is a problem, please contact the programmer, at 516-432-7201.

SPECIAL OR OTHER REQUIREMENTS: _____

Please circle if you will be using: Piano Power Point Presentation Lectern Slide Projector
Microphone Audio Tape Recorder Video or DVD to be shown? Yes _____ No _____ Will you be
bringing your own equipment? Yes _____ No _____ Will you need copies of program material? _____ If
yes, please supply original at least two (2) weeks prior. Blackboard Tables—how many tables? _____
(Draw picture of table set-up on back.)

Please review all entries and make corrections where necessary; then sign and return one copy of the confirmation with a bill on your letterhead. **If you have to cancel this performance, please call the Programmer or the Reference Desk Librarian as soon as possible at 432-7201 or email the library at info@longbeachlibrary.org. Subject - Att: Cancellation of program.**

Signature: _____

Print Name: _____

Address: _____

Telephone: _____

Email: _____

Website: _____

For assistance on the day of the performance, contact the Reference Desk Librarian on the first floor.

Programmer/Publicist

Phone: 516-432-7201

Email: info@longbeachlibrary.org

Fax: 516-889-4641