

March 26, 2008

Dear _____:

The following describes the terms and conditions for the agreed upon services and will constitute our letter of agreement and contract for services. If you agree with the terms as stated, please sign both copies, retain one for your records and return the other to ***Manion & Associates***, 5725 Oak Lake Trail, Oviedo, FL, 32765. If you have any questions about the terms of the contract, please contact our office by telephone prior to making any modifications.

A. SERVICES:

Provision of a 6-day Leadership Development program for managers and leaders at _____ Memorial Hospital. Dates include: 4/19; 6/14; 6/21; 9/13; 10/18; and 11/15. The sessions will run from 8:30 am until approximately 4:15 pm.

B. FEES AND PAYMENT CONDITIONS:

The fee for this service is \$_____ per day plus normal travel and business expenses (travel, meals, lodging, ground transportation and any shipping expenses) In addition there is a \$30/participant fee for instruments and teaching materials. A statement of fee and expenses will be submitted to you within one week of the completion of the work and payment is due within 30 days of submission. All checks should be made payable to Jo Manion .

C. HANDOUT MATERIALS:

Original copies of handout materials will be provided to the client and copied by the client for participants. The materials associated with this program are copyrighted and may be duplicated only for educational/informational purposes associated with this program unless prior written permission to do otherwise has been granted by ***Manion & Associates***.

D. RESCHEDULING:

Programs dates may be changed and rescheduled by the client without penalty if done so by direct communication with me or my office 15 days or more in advance of the scheduled date for the program. Dates rescheduled by the client less than 15 days prior to the originally scheduled program date will be charged a rescheduling fee equal to 60% of the contract fee.

E. CANCELLATION:

If the program is cancelled by me due to illness, death in the family, or weather related conditions and suitable alternative, mutually-agreed upon dates cannot be found, any monies previously received (and not earned) from the client will be refunded within 30 days.

If the contract is cancelled by the client less than 30 days prior to the scheduled date, the client is liable for and agrees to pay the total amount of the contract plus any airline penalties or other documented out-of-pocket expenses incurred due to cancellation.

The above constitutes the terms and conditions of this letter of agreement and contract for services and is hereby:

APPROVED ON BEHALF OF *MANION & ASSOCIATES*:

Jo Manion

Date

APPROVED ON BEHALF OF *MEMORIAL HOSPITAL*

Date