



## AEAI WORKSHOP AGREEMENT

I, \_\_\_\_\_ will give a workshop to members of AEAI on  
 \_\_\_\_\_ (date) at \_\_\_\_\_

lasting from \_\_\_\_\_ till \_\_\_\_\_ (time).

Workshop Description:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ Anticipated Class Size: \_\_\_\_\_

**AEAI will NOT reimburse costs for equipment or any non-consumable supplies. AEAI will only reimburse for supplies that have been consumed as a result of workshop activities. Leftover supplies should be distributed to workshop participants.**

**\*\*NO reimbursements will be made without an ORIGINAL RECEIPT\*\***

This section to be filled out following workshop, use the back or a separate sheet if necessary.

Expenses (Description) Original receipts must be attached.	Cost
_____	\$ _____
_____	_____
_____	_____
_____	_____
_____	_____
Number of Participants: _____	TOTAL COST: \$ _____

Workshop Presenter Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

District Representative/Conference Coordinator Signature: \_\_\_\_\_  
 \_\_\_\_\_ Date: \_\_\_\_\_ District: \_\_\_\_\_

**AEAI Representative:** Keep original and give a copy of this document to the workshop presenter.  
**Presenter:** Following workshop, submit this form with final receipts to Treasurer for reimbursement ASAP.

**Mail To:** Suzanne Finn - 128 Barton Avenue - Terre Haute, IN 47803-1838 - [Treasurer@aeai.org](mailto:Treasurer@aeai.org)