

GUEST SPEAKER / MUSICIAN REQUEST FORM

Guest Speaker/Guest Musician Requirements:

STEP ONE:

For guest speakers, currently employed with NAD: Background check is not required. If there is a VV background check, speaker should share the results with Texas Conference. Payment to current NAD employees is not allowed. You may reimburse travel, hotel and food expenses with receipts. Small honorarium or love offering allowed.

For Independent Ministries: Signed Contract, Background Check, Proof of Professional Liability Insurance, W-9, Church Vote are required. *Send these items to Rhonda Garner, RGarner@txsda.org along with this REQUEST FORM.*

For "other" guest speakers: \$600 per year maximum payment. Signed Contract, Background Check, Proof of Professional Liability Insurance, W-9, Church Vote are required. *Send these items to Rhonda Garner, Rgarner@txsda.org with this REQUEST FORM.* You may reimburse travel, hotel and food expenses with receipts.

STEP TWO: IF the request is compliant, Secretariat will forward Guest Speaker Waiver and Disclosure to TXC Volunteer Screening Coordinator, Irene Lazarus. If non-compliant, Pastor will be notified.

STEP THREE: Volunteer Screening Coordinator will initiate the background check. Please allow 48-72 hours for results.

STEP FOUR: Irene will advise Rhonda, via email, that the background check is complete with "ELIGIBLE" status.

STEP FIVE: A copy of this form with the Exec. Secretary's signature of approval will be emailed to the Pastor/Requestor.

Please make your request at least one month prior to the event date.

REQUEST DATE: _____

CHURCH: _____

TXC PASTOR: _____

PASTOR'S PHONE: _____

GUEST SPEAKER NAME: _____

TITLE / MINISTRY NAME: _____

EVENT DATE AND TIME: _____

EVENT LOCATION: _____

Choose One Guest Speaker/Musician Type:

Currently Employed by NAD Entity

Independent Ministry

Volunteer (Other) Guest Speaker

Submitted by:

PASTOR / CHURCH REPRESENTATIVE DATE

For TXC Office Use:

Request Received by Secretariat Date: _____

SIGNED CONTRACT RECEIVED

W-9 RECEIVED

PROFESSIONAL LIABILITY INSURANCE CERTIFICATE RECEIVED

BACKGROUND CHECK "ELIGIBLE" RESULTS RECEIVED

Other: _____

Notes:

COMPLIANT / COMPLETE