

## TERMS OF AGREEMENT/CONSENT FORM

Client's Name:

Client's Address:

Client's E-Mail Address:

Client's Phone No.:

Description of Work:

Date:

With this agreement, \_\_\_\_\_ hires A Flair For Writing to \_\_\_\_\_ at the rates specified. (See price quote.) Consultation time is available by phone at \$30 per hour. If the client chooses to provide information by questionnaire, the client is responsible for completing all necessary questionnaire forms by the dates specified. Full payment is due upon job completion. No work will be faxed or e-mailed until payment is received.

If, for any reason, it is decided that the client no longer requires the services of A Flair For Writing, **immediate** notice is required. If work has already begun, the client will be responsible for full payment.

Following work completion, the client is entitled to one free complete revision within 14 days. Additional revisions are charged at an hourly rate based on the nature of the project and determined upon request. Because of the significant time and effort involved in interviewing and writing, there will be no refunds. Clients are responsible for any remaining balances owed.

I have read the above and understand the terms of this agreement.

NAME \_\_\_\_\_

COMPANY NAME (if applicable) \_\_\_\_\_