

## Cooperative Creations Art Instruction Service Agreement

Cooperative Creations agrees to provide art instruction services to the client(s) listed below.

Client(s) Name(s): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Caregiver's Name(s): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Address: (optional) \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_ Email: \_\_\_\_\_

### SERVICES & CONDITIONS

The parties all agree that Barry D. Morgan of Cooperative Creations will provide Art

Instruction on [Date] \_\_\_\_\_, beginning at [Start time] \_\_\_\_\_ am/pm

and ending at \_\_\_\_\_ [Ending time] am/pm.

All parties involved agree that all interactions will take place online in Zoom, Skype or personal URL as a means of interaction and fulfillment of all obligations. **Both parties agree that sessions may be recorded for business purposes. Both parties agree this is not intrusive to anyone and no form of harassment is occurring.** Future, in- person gatherings can be negotiated provided it is lawful (within COVID restrictions guidelines) and all parties involved are agreeable to the in-person gathering.

**All parties involved agree that the client will provide their own materials at their own cost.** If necessary, a list of inexpensive materials and locations both online and to purchase locally.

Neither Barry D. Morgan, Cooperative Creations, or any of its employees shall post any client's work or their likeness without written and/or video consent from them. If, at any point, the client/caregiver change's their mind after agreeing, it is the duty of all parties involved

with Cooperative Creations to remove the client's works and likeness upon receiving written or video confirmation.

All parties involved agree that the use of trademarked properties are exclusively used for learning purposes and will not profit through trademarked products, copyright infringement or cause damage to the properties and their sources. Barry D. Morgan and all subsequent staff at Cooperative Creations are instructors and facilitators not art sellers or dealers. Cooperative Creations does not profit from any of the products arising from a client portfolio.

Cooperative Creations and all persons employed by its name, agree to read this contract/service agreement, and explain its content with full transparency to its clients. The client may make any enquiries concerning the services provided at any time and the staff will provide full disclosure.

## **PAYMENT**

The payment for art instruction is **\$35.00/hr.**

**The full amount is due a half an hour before the session. The payment is non-refundable. Clients have up until 15 minutes into the session to change their mind without explanation and can reschedule or as a last resort be refunded their payment.** However, if there is an emergency or there are extenuating circumstances after 15 minutes into the session, all parties can cancel, postpone and reschedule at no cost to the client. Negotiating time beyond the first 15 minutes, returning to that session and/or adding more time to completed sessions is left to the discretion of Barry D. Morgan, the Art Instructor.

Any additional payment packages, (a practice book, for example) while collaborative in approach, are, ultimately left to the discretion of the Art Instructor (Barry D. Morgan) who will determine the content and fee. The client/caregiver will be given a copy of the product or additional service upon payment. All parties agree they are under no obligation to purchase or honour anything other than the hourly art instruction service as agreed upon in this contract.

By signing this contract, all parties agree to the terms herein.

_____ Printed Name, Client	_____ Signature, Client	_____ Date
_____ Printed Name, Client	_____ Signature, Client	_____ Date
_____ Printed Name, Client	_____ Signature, Client	_____ Date
_____ Printed Name, Caregiver	_____ Signature, Caregiver	_____ Date
_____ Printed Name, Caregiver	_____ Signature, Caregiver	_____ Date