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Ministry Agreement with APOSTLEKENYA GARY THE APOSTLE, THE PROPHET, AND THE PREACHER

On behalf of Apostle Kenya Gary & Graced 2 Govern Global Ministries, thank you for the invitation to minister at your upcoming event. We are excited about partnering with you and believe your ministry, community, and region will be greatly blessed.

We ask that the following arrangements and requirements be met to secure your event on Apostle Kenya's calendar. By initialing and signing, you are signifying that you have entered a binding contract with Graced 2 Govern Global Ministries, and you agree to the terms and conditions below.

Please return all documents, questions, or concerns via email to infoekenyagary.com within 3 days. Apostle Kenya is honored at the invitation and's once you're event has been approved, you will receive a final confirmation letter along with marketing materials.

Kingdom Blessings

HONORARIUM/CANCELLATION FEES

Standard Honorarium \$1,500.00 Initial: _____ Single Session \$750.00 Initial: _____

Negotiable: YES

Apostle's honorarium is \$1,500.00, however this amount is negotiable; changes must be approved.

Please specify budget: _____

Cancellation Fee: \$500.00

There is a \$500.00 cancellation fee if your event is not canceled 30 days prior to your scheduled date. Reschedules will be considered a cancellation and all fees apply. All fees are due 3 days after you have informed the Executive Office via email.

TRAVEL REQUIREMENTS

All final travel arrangements are due 10 days prior to your event. This assignment requires:

○ Flight

1 First Class Ticket (Apostle Kenya Gary) + 1 Main Cabin Ticket (Team Member) Preferred airport: IAH Preferred airline: United, American, or Delta Seating preference: window seat, row 5 and up

Flight from: ______to: _____

Airline:

Confirmation:

O Driving \$50.00 per day rental car fee/.75 cents per mile round trip Total travel: \$_____



HOTEL ACCOMMODATIONS

Room preference: Two rooms (1) King Bed (1) Double beds close proximity **Preferred hotels**: Double Tree, Embassy, Hilton, Hyatt Once hotel is selected, please email info@kenyagary.com for approval.

A valid credit card must be kept on file and the rooms must be listed in the name: *Kenya Cowards*

If Apostle Kenya is arriving to your event before hotel check in time, the hotel must be secured for the day before so she and her team can go straight to the hotel upon arrival. (Applicable for flights only)

Hotel Name/Address: _____

Confirmation #:

Initial:_____

FACILITY REQUIREMENTS

Secured room that Apostle Kenya and her team can meet in prior to and after she ministers. Please provide name and contact information of person who will pick up/be assigned to Apostle and her team via email at least 3 days prior to event.

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PROMOTIONS/ADVERTISEMENT

One (1) image of Apostle Kenya will be provided for advertising. All advertisement must be approved before it is released to the public. G2G has a certain branding look and if the flyer provided does not meet the branding expectations, we will ask that it be redone at the cost of the host. If the host disagrees, G2G will not advertise your event, but you as the host can do so. Any tags of Apostle Kenya on social media platforms will be removed.

Please use the following name, ""Apostle Kenya Gary" and/or Graced 2 Govern Global Ministries on all publications. Any clips of Apostle Kenya must be obtained from G2G and not pulled from sources without prior approval. Failure to adhere to this request will result in all promotion being pulled until approval is made.

Initial:____

SPECIAL REQUESTS

Water: Room temperature Essentia or Life brands

Juice: Martinelli apple juice, simply apple, or cranberry juice

Hot tea: Peach or peppermint flavored tea with honey and lemon

Please note, Apostle does not eat before ministering and prefers fruit or a restaurant meal after. Initial:_____

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EVENT INFORMATION

Pastor/Host Name:	
Church/Organization Name:	
Church/Organization Locatio	n:
Type of event:	
Ministry Date:	Ministry Time:
Ministry Date:	Ministry Time:
Attire/Color Scheme:	
Point of Contact Name:	
Point of Contact Email:	

Point of Contact Number:_____

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