

Today's Date _____



**Writers in the Schools
Writer Statement**

Writer Name _____

Address _____

City _____ Postal Code _____

School(s) visited _____ Date _____ roundtrip _____ km

_____ Date _____ roundtrip _____ km

_____ Date _____ roundtrip _____ km

| | | |
|--------------|-------------------------------|-----------------|
| Honorarium | ____ Half day(s) x \$125 | = _____ |
| | ____ Full day(s) x \$250 | = _____ |
| | ____ Kilometers x 30¢ | = _____ |
| TOTAL | Honorarium plus travel | \$ _____ |

Signature _____

All financial arrangements must be made through the WFNS office. Use this form to request the entire writer's honorarium and travel. *Do not collect fees from the school.* Accommodation and meals (where applicable) are the school's responsibility and you must negotiate this independently with them. **Complete and mail this form to WFNS, 1113 Marginal Road, Halifax, NS B3H 4P7** Thanks!

WFNS Office Use

Date of Cheque _____ Cheque # _____ Amount \$ _____

Account 5400 Honorarium \$ _____

Account 5410 WITS Travel \$ _____

TOTAL \$ _____

Prepared by _____ Approved by _____ Board Approval _____