

CALLIOPE PUPPETS

www.calliopepuppets.com

Karen Konnerth

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LETTER OF INTENT

Karen Konnerth, dba CALLIOPE PUPPETS, does intend to work for

_____ (employer) (Contact name: _____)

email _____ phone _____)

performing _____ (how many) performances of _____ . (show) for audience size

of approximately _____ (how many), of age or grade range of _____ .

and/or _____ (how many) workshops in puppetry for :

___ Adults (how many in class _____)

___ Educators (of what age student _____)

___ Theater professionals (with special interest of _____)

___ Children (how many per class _____)

___ School class(es) grade level _____)

___ Non-school group (age range _____)

Date(s) _____

Performance or Workshop Fees:

\$ _____ based on \$ _____ per show or workshop.

Travel Fees:

Transportation (round trip from New Orleans, LA):

Driving _____ miles (figured at state rate per mile of \$ _____/mile): Total \$ _____

Airfare \$ _____ (from _____ to _____)..

Car rental \$ _____.

Total Transportation fees: \$ _____

Lodging Fees:

\$ _____ (for night(s) of _____).

Per diem of: _____ for _____ (number) days.

TOTAL PAYMENT: \$ _____

Contact made as per ___ telephone conversation ___ email communication ___ in-person
on _____ (date).

Signed,



Karen Konnerth

Date: _____