

Guest Artist Request and Payment Form

GUEST ARTIST INFORMATION – Complete all applicable areas. Incomplete forms will be returned to originator.

PAYEE (Guest Artist) _____

Mailing Address Apt _____ Address _____ City _____

Province _____ Postal Code _____ Email _____ Cell Phone _____

Social Insurance Number _____ GST Registration # (if applicable) _____

*Canadian residents must complete banking information to pay by electronic funds transfer on following page. Disregard if CDN banking info is already on file. International payments, except USA, require a wire transfer, complete wire transfer banking details on following page for each visit. USA guests receive a US cheque.

REQUESTED BY _____ Today's date _____

Requested by _____ Fee **\$500.00**

Indicate if another amount \$ _____ Explain _____

Artist's Name _____ Date of Visit _____ Time of Visit _____

Artist's Expertise _____

Where Work Performed _____ On Campus room #: _____ Skype/Zoom/Video Prov/State/Country: _____

Audience _____ Other, specify _____

Course mnemonic, number & section _____ Faculty or Program _____

**If event is outside of curriculum, you need a room booking, including lunchtime and evening talks. Email roombookings@ecuad.ca

Vendor #		AP Type	01 60 T4A-NR T4A-NRU	V#														
Invoice #		Invoice Date																
GL ACCOUNT CODE											CLEAR, BRIEF DESCRIPTION <i>MAXIMUM 24 CHARACTERS</i>				AMOUNT	Income Tax Info		
1	0	0	0							8	7	4	0					
1	0	0	0	0	0	0	0	0	0	2	1	1	5	Less 15% withholding tax				
Total																		

APPROVALS

Recorded by Approving Dept	Department Approval
Financial Services Approval	VP Finance Approval

- Step 1:** A Guest Artist Request and Payment form must be submitted by the staff/faculty member making the request at least TWO WEEKS PRIOR to the date of visit. Submit fully completed form to your department Admin Assistant.
- Step 2:** Confirm with the guest once request is approved by Department (Admin Asst).
- Step 3:** If event is outside of curriculum you will need a room booking. This includes lunchtime and evening talks. To request, email roombookings@ecuad.ca.
- Step 4:** Follow further instruction on back of form.

IMPORTANT INSTRUCTIONS - Guest Artist Request and Payment Form

Electronic Funds Transfer – for Canadian Bank Accounts	Date:
Payee Name:	Bank Name:
Payee Address:	Bank Address:
Payee Cell Phone #:	Institution Code (3-digits):
EFT Notification Email Address:	Bank Transit (5-digits):
Payments are made by electronic funds transfer to the bank account indicated. An email notification is sent when payment is made.	Bank Account # (up to 12 digits):
REQUIRED - Attach a void cheque or direct deposit form from your bank/online. It is the responsibility of the payee to notify ap@ecuad.ca if banking info has changed or corrections are needed.	

Wire Transfer Banking Details – for International Payments	Date:
Payee Name:	Bank Name:
Payee Address:	Bank Address:
Swift Code or BIC Code: SWIFT required for all international wire transfers	Account Number or IBAN Number: IBAN for most European Banks
CLABE Number: CLABE for Mexican Banks only	IFSC Number: IFSC for Indian banks only
Emily Carr University wire fees will be charged back to the requesting department. Some receiving and intermediary banks also charge wire and/or exchange rate fees which could be deducted from the amount received by the payee/vendor. Receiving/intermediary bank fees are the sole responsibility of the payee/vendor.	
Personal information on this form is collected for the purpose of electronically transferring funds to your financial institution. Personal information collected will be used and disclosed in compliance with the BC Freedom of Information and Protection of Privacy Act.	

USA guests receive a US dollar cheque, drawn on a US bank and mailed to home address. Cdn amount is converted to USD on date of visit.

Tax receipts are issued for all guest artists/visitors. All non-residents of Canada, 15% tax is withheld and submitted to the CRA unless a waiver is received from Canada Revenue Agency no less than 30 days **prior to visit**. It is the responsibility of the visitor to obtain the waiver.

Guest Artist Request and Payment Form relating to the University's fiscal year end (March 31) must be submitted to Financial Services by the First Friday in April. Please refer to Policy Number 7.1 and 7.11; for complete details.

Completion of the Guest Artist Request and Payment Form. INCOMPLETE FORMS WILL BE RETURNED TO ORIGINATOR.

1. PAYEE – Type or print clearly the name of the guest artist.
2. MAILING ADDRESS – Enter the full current mailing address of the Payee; Apartment, Address, City, Province, Postal Code.
3. EMAIL – Enter the current email address of the Payee.
4. CELL PHONE NUMBER – Enter current phone number including area code and country code if required.
5. SOCIAL INSURANCE NUMBER – Enter the social insurance number of the Payee. Not required if a returning guest/visitor.
6. GST REGISTRATION NUMBER – Enter the social insurance number of the Payee, if applicable.
7. * Canadian residents must complete banking information to pay by electronic funds transfer. Disregard if CDN banking info is already on file. International payments, except USA, will require banking details, please complete wire transfer banking information on following page for each visit. USA guests receive a US cheque.
8. TODAY'S DATE – Enter today's date
9. REQUESTED BY – Enter your full name (type or print clearly)
10. FEE – The professional artists' fee is set by CARFAC (Canadian Artists Representation Collective) and updated annually. CARFAC serves at the national voice of Canada's professional visual artists. The fee cannot be reduced. www.carfac.ca
11. INDICATE IF ANOTHER DOLLAR AMOUNT - Speak to Academic Affairs Admin Assistant for presentation's or consultation's over four hours.
12. EXPLAIN – Explain the reason for the other amount requested.
13. ARTIST'S NAME – Type or print full name clearly.
14. DATE OF VISIT - Enter the date of when work is to be performed and the time
15. TIME OF VISIT – Enter the time the visit is to take place. **If event is outside of curriculum you will need a room booking. This includes lunchtime and evening talks. Email roombookings@ecuad.ca.
16. ARTIST'S EXPERTISE - A brief description, listing professional experience.
17. LOCATION WHERE WORK WILL BE PERFORMED – Check the appropriate box where work is performed. Fill in the blanks if required.
18. AUDIENCE – Describe the audience, i.e. students in a class, all of ECU, faculty only, staff only, for public and ECU, etc.
19. OTHER, SPECIFY – Complete if not tied to a course, was it a lecture, presentation, artist talk, etc.
20. COURSE MNEMONIC, NUMBER & SECTION – Complete if this is tied to a course.
21. FACULTY OR PROGRAM – Enter the Faculty or program is this for or organized by.
22. NOTE: Electronic Funds Transfer for Canadian Bank Accounts - Payments made to a Canadian bank – complete the direct deposit banking information. If they were a guest before and completed an EFT application, no need to complete again.
23. NOTE: Wire Transfer Banking Details – If artist is International, complete each section if applicable for payment by wire transfer. A bank fee is charged to the guest in most cases. Must be completed each time a visit is made.
24. NOTE: USA payments - USA guest payments made by cheque in US dollars, drawn on a US bank account and mailed.