

## 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 **\$335.00**

Indicate if another amount \$ \_\_\_\_\_ Explain \_\_\_\_\_

Artist's Name \_\_\_\_\_ Date of Visit \_\_\_\_\_ Time of Visit \_\_\_\_\_

Artist's Expertise \_\_\_\_\_

Location Work Performed  On Campus  Skype/Zoom location: \_\_\_\_\_  Other \_\_\_\_\_

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](mailto:roombookings@ecuad.ca)

Approving Dept + Financial Svcs Only

Vendor #		AP Type	01 60 T4A-NR T4A-NRU	<b>V#</b>	
Invoice #		Invoice Date			
GL ACCOUNT CODE		CLEAR, BRIEF DESCRIPTION MAXIMUM 24 CHARACTERS	AMOUNT	Income Tax Info	
				T4AFS	T4AD00 ✓
1	0 0 0	8 7 4 0			
1	0 0 0 0 0 0 0 0 0 0 2 1 1 5	Less 15% withholding tax			
<b>Total</b>					

**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](mailto:roombookings@ecuad.ca).
- Step 4:** Follow further instruction on back of form.

## IMPORTANT INSTRUCTIONS - Guest Artist Request and Payment Form

<b>Electronic Funds Transfer – for Canadian Bank Accounts</b>	<b>Date:</b>
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 bank notification letter. It is the responsibility of the payee to notify <a href="mailto:ap@ecuad.ca">ap@ecuad.ca</a> if banking info has changed or corrections are needed.	

<b>Wire Transfer Banking Details – for International Payments</b>	<b>Date:</b>
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](http://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](mailto: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.