

VENDOR AGREEMENT

Vendor: \_\_\_\_\_

Vendor's Representative(s): \_\_\_\_\_

Vendor's address/phone: \_\_\_\_\_

The purpose of this vendor will be to: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Requested dates/times/space/set-up required: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Sponsoring Club or Department: \_\_\_\_\_

Sponsoring Person(s)/phone: \_\_\_\_\_

Day: \_\_\_\_\_

Time: \_\_\_\_\_

Location: \_\_\_\_\_

Approved by: \_\_\_\_\_

Student Life Coordinator

Date: \_\_\_\_\_