SOU VENDOR AGREEMENT

This agreement details the relationship and responsibilities between the parties below made on this date _____
Vendor's Name: _____
Vendor's Business Name: _____
Vendor's Address: _____
_____
Vendor's Phone: (w)_____(h)_____
Description of Merchandise: _____
_____
Date of Sale: _____to_____

Both of the above parties agree to the following:

1. The vendor will pay a fee of $50.00 per day to the Stevenson Union – payable two weeks in advance. Please mail to Stevenson Union, 1250 Siskiyou Blvd., Southern Oregon University, Ashland, OR. 97520.
2. The vendor shall have a maximum of 2 eight foot tables and 4 chairs.
3. Vendor will provide a written guarantee statement including information on consumer care and return or compensation for goods sold.
4. Save, defend, indemnify, and hold harmless the State of Oregon, acting by and through the State Board of Higher Education, on behalf of Southern Oregon University and their officers, agents, employees, and members from all claims, suits, and actions of whatsoever nature resulting from or arising out of the activities, equipment and facilities use by agents, employees, or participants under this agreement.
5. Abide by all Southern Oregon University policies and procedures.

Desired Location **Foyer** _____ **Courtyard** _____

Number of tables needed **2**_____ **1** _____ **None** _____

_____
Vendor Signature Date

For office use only:

Date Scheduled _____ Initial_____

Payment Received $_____ Date _____ Initial _____

Original, SU Records Copy: Vendor