

## **Vendor Application**

## Center for Student Life and Leadership Development

This form must be filled out **7 business days before requested date to be on campus** 

Full Name (	Person Tabling):	Phone Number (Contact Pers	on):
Email (Cont	act Person):	Company Nam	ne:
Company M	lailing Address:		
* Please atta	ach Proof of insurance or Busine	ess License Number to this form.	
Type of Dist	tribution or Selling:		
Price range	of product you are selling:		
Date (s) Red	questing:	Hours on Campus:	
	you would like to be on campu ookstore    Outside Amphithe	us: ater	lding 9, near 1st floor stairs
Supplies: (P	lease check what you will need	d) $\Box$ 8 foot table $\Box$ 2 chairs	
ing to be legally representatives, fees, arising out out of injuries of with my presence manner that disr.  The Center for Scriteria for the st advance payment the spelling space. The Vendor agrees to save ar all costs, liability	bound for myself, my heirs, representatives board members, officers, employees, attorned of or relating to my participation in activities accidents sustained by me or any other personal personal programs, and college activities and Leadership Development resultability of products, crafts, services, or tale at of the Vendor's space fee will be returned, see and related costs of individual vendors assess to pay the State Franchise Tax Board any and hold harmless the San Mateo County Cory, damage, and expenses (including the expense)	ge and use of facilities of Cañada College for selling or distribution, successors and assigns, hereby hold harmless, release and foreverselys, successors and assigns, from against any and all claims, demonstrated as selling or distribution of literature or solicitation of signson, or damage to property, or claims arising out of defective or ellected as a result of sales will be paid by the vendor to the approximation of blocks or impedes the safe flow of traffic within corridor esserves the right to reject any application for a selling space for a sents for the event, space limitations, late applications, or late arrivations. There is no guarantee, expressed or implied, that the vendor transcociated with the event. The sponsor is not obligated to refund they applicable sales tax associated with the sale of goods and/or semmunity College District (SMCCD). Cañada College, their officense of legal services) brought about by reason of injury or damage.	ver discharge its officers agents, nands, liabilities, damages, causes of action, costs or gnatures, including, but not limited to, claims arising inferior materials or misinformation, in connection opriate agency. Materials shall not be distributed in a rs and entranceways at the College.  The present including, but not limited to, the sponsor's val. If a vendor's application is not accepted, any insact a sufficient level of business to cover the cost of the Vendor's space fee if the Vendor's sales are poor, revices sold at the event. The undersigned hereby ficers, employees, and students harmless from an; and
arising as a resul	It of the activities involved in this event.  * MUST ATTACH PROC	OF OF INSURANCE OF BUSINESS LICENSE TO TI	HIS EORM *
		I need to pay in advance to reserve a table on campus.	
Signature o	f Requester:	Date:	
Signature of Student Life Manager:		G#:	Date :
- Self employ		npanies, clinics etc): \$50/day to <u>Associated Students Cañada College</u>	
	For Office Use: (	Contract must be 7 Business Days Prior to Date (s) F	Requested
		Received By	
Receiv	rers G#:	Receivers Email:	

Check or Cash Date

Amount Paid (circle form of payment): Yes or No Amount \$