Fraternity & Sorority Life
THIRD PARTY VENDOR CONTRACT

Vendor Name: Contact Person:
Address:
Phone Number:
E-mail Address:
Fax:
Facility Capacity: Price Information:

THE VENDOR MUST:
1. Be properly licensed by the appropriate local and state authority. This might involve both a liquor license and a temporary license to sell on the premises where the function is to be held.

ATTACH COPIES OF STATE AND LOCAL LICENSES TO THIS CHECKLIST.

2. Be properly insured with a minimum of $1,000,000 of general liability insurance, evidenced by a properly completed certificate of insurance prepared by the insurance provider. The certificate of insurance must name as additional insured (at a minimum) the local chapter of the fraternity hiring the vendor as well as the National fraternity with whom the local chapter is affiliated.

ATTACH A COPY OF THE CERTIFICATE OF INSURANCE.

3. Agree to cash sales only, collected by the vendor, during the event.
4. Agree to all the responsibilities that any other purveyor of alcoholic beverages would assume in the normal course of business, including but not limited to:

a. Checking identification cards upon entry. Proper ID (Valid Driver's License, Passport or Military ID) must be verified and marked with a bracelet or similar system. (F&M will provide Birthday List)
b. Not serving minors.
c. Service is limited to Beer and Wine only. Hard Liquor, Mixed drinks, and products such as Smirnoff Ice, Mike's Hard Lemonade, and the like are NOT permitted.
d. Unsalted foods and alternative beverages must be available to guests. (Tap water is not sufficient; however, bottled water is acceptable)
e. Not serving individuals who appear to be intoxicated
f. Maintaining absolute control of ALL alcoholic containers present
g. No alcohol can be purchased with chapter funds. Cash bar only.
h. Collecting all remaining alcohol at the end of a function (no excess alcohol - opened or unopened - is to be given, sold or furnished to the chapter).
I. Control of all alcohol on the premises.

College will provide the vendor an F&M student birthday list upon request

The chapter and vendor do hereby accept full responsibility for the services stated above. The chapter and vendor understand that failure to abide by all terms of this agreement and all event policies and regulations will result in disciplinary action. The Chapter understands their responsibility for ensuring the legal and appropriate behavior and actions of their membership. By signing this contract we understand that only through compliance with these conditions will the chapter be in compliance with Franklin & Marshall College, FIPG , Insurance National organization requirements & policies.

Printed Name of Authorized Vendor Representative

_____

3rd Party Vendor/Chapter Accountability Agreement

In signing this form on behalf of _____, I am agreeing that
(Name of Establishment)

This establishment will host registered event involving alcohol on _____
(Date of event)

for _____
(Fraternity/Sorority Organization)

I understand that as the host venue of this event, I am responsible for ensuring that the establishment staff enforces local, state, and national laws. I also agree to contact Fraternity and Sorority Life at Franklin & Marshall College (717-358-4875) if the participating chapters cause excessive trouble for the establishment and its staff. Such trouble can include, but is not limited to:

- Attempted use false identification
- Bringing in outside alcohol into the establishment
- Inappropriate behavior
- Damaging establishment property
- Providing alcohol to underage guests

In addition, I also agree to ensure that the management and staff of

_____ will complete the following steps in order
(Name of Establishment)
to remain in good standing for future registered Franklin & Marshall Fraternity & Sorority events:

- Identification will be checked at the door/Confirm F&M Birthdate List
- Guests will be monitored, and those who are exhibiting inappropriate behavior will not be allowed to further partake in consuming alcoholic beverages and will be required to exit the establishment
- I have provided proof of my establishment's $1 million (minimum) insurance policy
- I have provided a copy of my establishment's liquor license

In order to ensure the validity of this agreement, the establishment manager and the Fraternity/Sorority event chair, risk management officer, and president, must sign and date this agreement below:

_____ _____
(Establishment Manager Signature) (Printed name)

_____
(Date)

_____ _____ _____
(President Signature) (Printed name)

_____
(Date)

_____ _____ _____
(Risk Manager Signature) (Printed name)

_____
(Date)

_____ _____ _____
(Event Chair Signature) (Printed name)

_____
(Date)

(Social Chair Signature) (Printed name) (Date)

This form must be submitted to the Fraternity and Sorority Life Office no later than seven business days before the registered event.