



STRATEGIC PARTNERSHIP AND
IN-KIND DONATIONS
SERVICES AGREEMENT

COMPANY:	
CONTACT NAME:	
Name as you wish to be listed on promotional materials:	
ADDRESS:	
CITY, STATE, ZIP	CITY: STATE: ZIP:
PHONE NUMBER:	
E-MAIL:	
WEBSITE:	

Name of Event:	
Date of Event:	
Location of Event:	
Coordinator of Donation/Services:	
Brief Description of in kind donation or services to be provided—or attach an invoice.	
Value of in kind items and/or services (estimated dollar value) Attach additional information if needed.	
If applicable, are there any particular needs or set up requirements that we should be aware of?	



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Best time/way to contact me (circle): **Phone / Email / Morning / Day / Evening**

*****COMPANY LOGO*****

Please provide a .tif, .eps or .jpg at 300dpi format of your company logo in color. Please note reproduction quality will not be guaranteed if the logo is not provided in this format. LOGO MUST BE RECEIVED FOUR(4) WEEKS PRIOR TO THE MEETING OR EVENT.

By signing this agreement I agree to provide the services as outlined in this strategic partnership form and obtain any applicable benefits and opportunities as agreed to.

Company Contact Signature

Date

ISES RI President Signature

Date

LIMITATION OF LIABILITY - In no event shall ISES Rhode Island, its officers, directors, employees, subsidiaries, chapters, affiliates and assigns or its licensors, suppliers or any other party involved in the creation, production or delivery of this event be liable for any incidental, consequential, indirect, reliance, special or punitive damages arising out of or relating to this Event, including without limitation damages for harm to business, lost profits, lost savings or lost revenues. By signing this, the company agrees that they will not bill ISES, Rhode Island Chapter, for the mentioned items listed above, and that these items are given as an in kind donation.

Please note all information above, must be complete and accurate as possible. We are not responsible for incorrect, illegible information or if logo is not provided in the correct formats or in a timely manner to receive applicable benefits.

Thank you for your generosity during this event and your continued support of ISES Rhode Island.