

## FOOD PROVIDER AGREEMENT

## Reserve Your Space for IFCS' Nibbles & Sips

Event Date: February 24, 2024

Deadline for submission: December 15, 2023

| Space is limited to the first 15 Food Providers. There is no fee for participation.  Event Location: Hyatt Regency Denver Tech Center, 7800 S. Tufts Avenue, Denver, CO  Food Provider: |  |   |                 |                              |        |
|---|--|---|-----------------|------------------------------|--------|
|   |  |   | Phone:          | Fax:                         | Email: |
|   |  |   | Contact Person: |                              |        |
|   |  |   |                 | item(s) will you serve at Ni |        |
|   |  |   |                 |                              |        |
|   |  |   |                 |                              |        |
|   | Food Pro   | ovider Agreement  |                 |                              |        |
| prior to deadline,<br>promotions. All p   | IFCS will include company                                | ent with Integrated Family Community Services (IFCS)<br>name or logo on Nibbles & Sips invitations and<br>s will be included on the event website, primer event<br>e.   |                 |                              |        |
| This agreement n<br>the prior written of<br>Provider's space i  | approval of IFCS nor can a                               | d, in whole or in part, by Food Provider, without<br>ny other party without such approval use the Food  |                 |                              |        |
| the Food Provide<br>representatives. F<br>losses of any natu  | r. IFCS shall have no respo<br>Food provider accepts the | gligence of others and acts of God shall be borne by<br>nsibility to Food Provider, its agents, employees, or<br>premises, holds IFCS harmless from any claims or<br>vider's use of the premises or operations to the end |                 |                              |        |
| This agreement is   | s effective as of  | through February 24, 2024.  |                 |                              |        |
| Food Provider Sign  | ature and Date   | IFCS Signature and Date   |                 |                              |        |
| Contact Todd McI  | Pherson Develonment Dir                                  | rector, to submit your completed form, or with any  |                 |                              |        |





questions: 303-725-9894 or toddm@ifcs.org