

NOWU\$ Savings Program Provider / Vendor Agreement

INSTRUCTIONS: Please fill out the following form. Then print & sign the agreement, and send to tim@nowu.ca

NAME & LOCATION OF PROVIDER:

NAME OF BUSINESS:	
NAME OF OWNER:	
BUSINESS ADDRESS:	
BUSINESS PHONE #:	
BUSINESS WEBSITE:	
(Hereinafter referred to as "the provider")	

THE NOWU MEMBER DISCOUNT

Discount Description:

A NOWU Member will receive the discount described above from the provider. When the member completes the following:

- Presents their NOWU Membership Card to the provider to prove their current membership with NOWU
- Other requirements (if required): ______

ADVERTISING

National Organized Workers Union reserves the right to use the logo of the provider for purposes of advertisement, both in print and on National Organized Workers Union websites.

□ (optional) The provider agrees to use the advertising materials for the NOWU\$ Savings Program in their business / storefront. This material will be of no cost to the establishment, and will be provided by NOWU.

EXPRIY

This lifespan for this agreement will be **one year** from the date of signature. Both parties reserve the right to terminate this agreement for any reason, giving the other party **thirty (30)** days' notice by writing or email.

AGREEMENT

l	, of		agree that	the provider will offer members of
(name of owner)	· ·	ame of business)	d above and be	nour the conditions stated above.
the National Organize			a above, and noi	four the conditions stated above.
Signed at		on		2021
5	(location)		(date)	
Tim Oribine		NAME OF OWNE	ER (Printed):	
President of NOWU		NAME OF BUSIN	. ,	