

AGREEMENT FOR PROFESSIONAL SERVICES

Contract #

THIS AGREEMENT is hereby entered into by the SONOMA COUNTY JUNIOR COLLEGE DISTRICT (1501 Mendocino Ave, Santa Rosa, CA 95401), hereinafter referred to as DISTRICT, and;

PROFESSIONAL SERVICES CONTRACTOR

attach a W9 (if new vendor)

MAILING ADDRESS

CITY

STATE

ZIP

hereinafter referred to as CONTRACTOR.

CONTRACTOR agrees to provide services to the DISTRICT enumerated in this Agreement as follows for the purpose of:

A. Services. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

B. Service location(s) department and campus: \_\_\_\_\_  
\_\_\_\_\_

C. Time and dates for services: \_\_\_\_\_  
\_\_\_\_\_

D. Payment terms and conditions are: Payment of \$\_\_\_\_\_ / Net 30

E. 1. The DISTRICT shall hold harmless, defend and indemnify the CONTRACTOR, its officers, agents and employees, from and against any liability, claim, action, cost, damage or loss for injury including death to any person or damage to any property arising out of the DISTRICT'S negligence. This obligation shall continue beyond the term of this Agreement as to any act or omission which occurred during or under this Agreement.

2. The CONTRACTOR shall hold harmless, defend and indemnify the DISTRICT, its officers, agents and employees, from and against any liability, claim, action, cost, damage or loss for injury including death to any person or damage to any property

arising out of the CONTRACTOR'S negligence. This obligation shall continue beyond the term of this Agreement as to any act or omission which occurred during or under this Agreement.

F. CONTRACTOR shall provide DISTRICT with a Certificate of Insurance upon request.

G. Additional terms and conditions are: \_\_\_\_\_

H. This agreement may be terminated by either party notifying the other, in writing, at least 30 days prior to the date of termination.

I. DISTRICT contact information:

Department: Student Life, Equity & Engagement Contact: Hilleary Zarate

Telephone: 707-527-4239 Fax: \_\_\_\_\_

THIS AGREEMENT IS ENTERED INTO THIS 20<sup>th</sup> DAY OF March, 2018

FOR THE DISTRICT:

CONTRACTOR:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Laura Rivera

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Director Purchasing and Graphics Services

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Telephone/fax

\_\_\_\_\_  
EMAIL

\_\_\_\_\_  
Date