



# SWING PHISWING

## Social Fellowship, Incorporated®

National Office • P.O. Box 1124 Dearborn, MI 48121 • 202-684-8650/1877-447-1969 • [treasurer@swingphiswing.org](mailto:treasurer@swingphiswing.org)

### VENDOR INDEMNIFICATION CLAUSE

Swing Phi Swing Social Fellowship, Inc.® (“the Fellowship”) agrees to indemnify, and hold harmless the Vendor from and against any and all claims, demands, loss or liability of every nature, for injuries to person and/or property, occurring in or about or in any way connected with the Vendor and its use by the Fellowship for the event, to the extent arising out of the negligence of the Fellowship, its officers, members, or guests.

The Vendor agrees to indemnify and hold harmless, the Fellowship, its officers, members, or guests from and against any and all claims, demands, loss or liability of every nature, for injuries to persons and/or property, occurring in or about or in any way connected with the Vendor and its use by the Fellowship for the event, to the extent arising out of the negligence of the Vendor, its agents, employees, or guests.

In the event of any claims, demands, loss or liability arising out of the negligence of both the Fellowship and the Vendor, each party shall be responsible, including reasonable attorney’s fees and costs, based upon its proportionate share of negligence.

#### FELLOWSHIP

Swing Phi Swing Social Fellowship, Inc.

\_\_\_\_\_  
National President Signature

\_\_\_\_\_  
Date

#### VENDOR

\_\_\_\_\_

\_\_\_\_\_  
Proprietor/Vendor Representative Signature

\_\_\_\_\_  
Date



# SWING PHISWING

**Social Fellowship, Incorporated®**

National Office • P.O. Box 1124 Dearborn, MI 48121 • 202-684-8650/1877-447-1969 • [treasurer@swingphiswing.org](mailto:treasurer@swingphiswing.org)

## APPLICATION FOR VENDOR AUTHORIZATION INSTRUCTIONS

The attached form must be completed by organization members, affiliate chapters, independent individuals or companies requesting authorization to sell paraphernalia products which may or may not include the insignia (*shield*) or other registered marks of Swing Phi Swing Social Fellowship, Inc.

This form, along with the appropriate fee must be forwarded to:

**SWING PHI SWING S.F.I.  
ATTN: National Treasurer  
P.O. Box 1124  
Dearborn, MI 48121**

All payments must be rendered in the form of cash, or business check and must be received at least two weeks prior to the sale of any applicable items. Authorized vendors will be given an official vendor identification badge, which should be displayed at all times during the sale of items. Authorized vendors are entitled to a stand, booth or table for the express purpose of selling products at the Swing Phi Swing Social Fellowship, Inc. National Convention or other specified national events. By virtue of this agreement, authorized vendors are expected to sell only non-descript items (those containing no Swing moniker) or those which comply with the organization's U.S. Patent and Trademark Registration.

### LOGO & BRAND USAGE TERMS OF USE

Swing Phi Swing Social Fellowship Inc. © has various registered Trademarks that are reflective of our unique organization. Our registered trademarks can only be used with permission and should not be reproduced without written permission.

All of the items below are federally registered trademarks with the U.S. Patent and Trademark Office. All federally registered trademarks should be used with the federal registration symbol (e.g. ™, ©, or ®).

#### Registered Trademarks

Our Shield

Swing Phi Swing Social Fellowship Inc.®

Swing Phi Swing®

S Phi S®

SΦS®

Sisters With Interest Never Gone Promoting Higher Intelligence Supporting Women In Need of Growth™

Reproduction without permission is a legal infringement, and the violator is subject to prosecution.

#### Use of Material

All material on this website is the sole property of Swing Phi Swing. All material references but not limited to, photographs, content, trademarks, service marks, and logos ("Content") are the exclusive property of Swing Phi Swing or our contributors and are copyrighted. Content may NOT be copied, downloaded, reproduced, reused, distributed, transmitted, or modified for any purpose without the written permission of Swing Phi Swing Social Fellowship Inc. Any unauthorized use of the Content may violate copyright laws, trademark laws, and other applicable laws.

To get written permission to use any content please contact [treasurer@swingphiswing.org](mailto:treasurer@swingphiswing.org). You need JavaScript enabled to view it. Use the subject "Content Consent." If you fail to receive a response, it is NOT an implied or explicit permission to use any form of content or registered materials.



# SWING PHI SWING

Social Fellowship, Incorporated®

National Office • P.O. Box 1124 Dearborn, MI 48121 • 202-684-8650/1877-447-1969 • treasurer@swingphiswing.org

## APPLICATION FOR VENDOR AUTHORIZATION

*Please Type or Print Clearly*

Date of Application: \_\_\_\_\_  
*Month / Day / Year*

Company/Business Name: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_  
*Last First M.I.*

Street address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Primary Telephone: \_\_\_\_\_ Secondary Telephone: \_\_\_\_\_  
*Area Code & Phone Number Area Code & Phone Number*

E-mail Address: \_\_\_\_\_

### VENDOR CLASSIFICATION *(check one)*

- Convention Vendor - Four Day Event (ONLY FOR VENDORS NOT SELLING MERCHANDISE WITH THE SWING MONIKER OR LOGO).....\$200.00
- Preferred Vendor - One Year Subscription ..... \$400.00

*20% Discount for chapters and members of Swing Phi Swing or Groove Phi Groove Social Fellowships, Inc.®*

METHOD OF PAYMENT *(check one)*:  Cash  Business Check

Description of Products to be sold: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<b>FOR NATIONAL OFFICE USE ONLY</b>			
Received By: _____	Date: _____	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied