



The Grand Chapter
Kappa Alpha Psi® Fraternity, Inc.
TRAINING FOR LEADERSHIP SINCE 1911

INTERNATIONAL HEADQUARTERS

2322-24 North Broad Street * Philadelphia, PA 19132 * P 215-228-7184 Ext. 25 * rpeterson@kappaalphapsi1911.com

APPLICATION FOR VENDOR LICENSE

Dear Applicant,

This agreement is entered into by: _____
(Your company's name)

and Kappa Alpha Psi® Fraternity, Inc. The holder, listed above may be permitted to sell goods or services as stated in this application, at all National Fraternity sponsored events/activities and hereby agrees to adhere to the Rules and Restrictions described in same for one year from date of issue. Province/Regional and Chapter events are coordinated directly and at the discretion of those entities.

In addition, the parties agree as follows:

1. The Vendor shall pay to the Fraternity, upon execution of the Agreement, the amount listed below which constitutes a non-refundable payment on account of the License fee here in. This fee grants permission for rights and the use of our intellectual property.
 - a. \$350 – Kappa Alpha Psi Member **(In Good Standing=LM/Dues & Housing Paid) (Member must own or have part ownership in the company for this fee)**
 - b. \$500 – All others or a Member not in good standing
2. Vendor **MUST** submit sample(s) and/or photo(s) of paraphernalia to be sold in order for application to be approved. **Applications received without samples will be denied.**
3. Original issued vending license with official seal **must be displayed by Vendor at all events (No Copies).**
4. Vendor shall not sublet booth(s).
5. Additional fees are to be paid as determined by the Grand Chapter or Province Board of Directors to set up at National or Province meetings respectively.
6. The Vendor will comply with local laws and site specific requirements. It is understood and agreed that issuance of this vendor's license does not purport to satisfy all of the vendor's obligations and duties under local laws, or under venue or site requirements. It is specifically acknowledged that Vendor's additional obligations may include but not be limited to the following:
 - a. The legal obligation to obtain a jurisdiction's occasional occupational license or obtain a waiver or exemption from obtaining that license.
 - b. The legal obligation to collect sales tax or obtain an exemption from the duty to do so.



- c. The legal obligation to collect and remit to the jurisdiction other fees, taxes, assessments or obtain an exemption form from the duty to do so.
- d. The legal obligation to report total values of good and services sold and pay a tax or assessment on the same or obtain an exemption for the duty to do so.
- e. The duty to register as an entity doing business in the jurisdiction.

KAPPA ALPHA PSI® FRATERNITY, INC. reserves the right to revoke the Vendor’s License upon failure of Vendor to comply with any condition of said License or any provision of this agreement but said cancellation shall not relieve Vendor of its obligation to the License Fee as provided for herein.

I have read and understand the above. Signature: _____

VENDOR RESTRICTIONS

KEEP A COPY OF THIS PAGE FOR YOUR RECORDS

The following guidelines **MUST** be adhered to by all vendors. Any vendor found guilty of any of the following will be immediately escorted off the premises by security during any Kappa sponsored events. In addition, their license will be **REVOKED** with **NO** refund issued.

AS A LICENSED VENDOR, YOU CANNOT:

1. Manufacture, produce or sell any facsimile or representation of the “Diamond” (The badge of the Fraternity shall be restricted to its use as a badge. Neither the badge nor any facsimile thereof shall be used on programs, articles of wear, stationary, jewelry, announcements, invitations, etc.) Please do not put the “Diamond” badge on any item. (STATUTE 35 Section 7 of the Constitution and Statues)
2. We have relaxed our policy on the sale of items using white, red or cream colors. Production and sale of merchandise in any other colors is strongly prohibited. We recommend the use of the official fraternity colors: **Crimson (PMS#199C) and Cream (PMS#461C)** however red and white is acceptable.
3. Produce or sell undergarments of any kind (Pajamas and workout gear may be ok).
4. Reproduce the Coat-of-Arms or use the Fraternity’s name without the registered trademark. ®
5. Reproduce or sell items bearing other companies names, or intellectual property under any circumstances. (e.g. Playboy Bunny Logo, etc.)
6. Sell any items that have been reproduced illegally (e.g. Boot-Leg Cd’s, DVD’s, Video Tapes, etc.) in which you do not have appropriate written permissions to sell.
7. Produce or sell “Paddles” of any kind. (Unless in a manner approved by this office e.g. Key chains/Commemorative, etc.)
8. Produce, market or sell alcohol/wine beverages.

SPECIAL NOTE: IT IS EXPRESSLY UNDERSTOOD AND AGREED BY VENDOR THAT KAPPA ALPHA PSI FRATERNITY, INC., ITS MANAGERS, OFFICERS, MEMBERS, SPONSORS, EMPLOYEES, OR AGENTS, SHALL NOT BE LIABLE FOR LOSS, THEFT OR DAMAGE TO THE GOODS OR PROPERTIES OF VENDORS



VENDOR APPLICATION

KAPPA ALPHA PSI® FRATERNITY, INC.

- New Application (Complete and return all pages)**
- Renewal Application (Complete and return only pages 3 and 5)**

*Please Note: Your company name and contact information will be posted publicly on our national website (www.kappaalphapsi1911.com) under the Vendors section.

Company Name: _____

Company Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

E-mail: _____

Website: _____

Your company is primarily: Retail Store Manufacturer/Wholesaler Mail Order

Primary Contact Person: _____

Signature: _____

Title: _____ Date: _____

If member of Kappa, provide your **membership ID number**: _____

Please list the types of merchandise produced and sold by your company. **Please provide photographs of a representation of your Kappa Alpha Psi® Paraphernalia to be sold or send physical samples. Applications will NOT be approved without samples!**



Please list the Distributors and/or Manufacturers if any who regularly handle your products. If none leave blank.

DISTIBUTORS – Locations in which your products are sold or displayed.

Company Name: _____ Address: _____
City: _____ State: _____ Zip: _____ Phone: _____

Company Name: _____ Address: _____
City: _____ State: _____ Zip: _____ Phone: _____

MANUFACTURERS – Companies that produce your designs, or from which your company regularly purchases items.

Company Name: _____ Address: _____
City: _____ State: _____ Zip: _____ Phone: _____

Company Name: _____ Address: _____
City: _____ State: _____ Zip: _____ Phone: _____

Your company does does not plan to attend Province/Regional Events.

Your company does does not plan to attend the bi-annual Grand Chapter meetings.

Province/Region your company generally services:

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Northern | <input type="checkbox"/> Eastern | <input type="checkbox"/> Southern | <input type="checkbox"/> Western |
| <input type="checkbox"/> North Central | <input type="checkbox"/> East Central | <input type="checkbox"/> South Central | <input type="checkbox"/> Southwestern |
| <input type="checkbox"/> Southeastern | <input type="checkbox"/> Middle Eastern | <input type="checkbox"/> Northeastern | <input type="checkbox"/> Middle Western |



VENDOR APPLICATION

PAYMENT OPTIONS:

Cash Credit/Debit Card Check Money Order

\$350.00 - Kappa Alpha Psi Member In Good Standing

\$500.00 - All others or Member not in good standing

***The vendor fee is on a calendar year basis which starts on the day the application is accepted with payment. You have the option to renew at the end of your license term if you so choose.**

Master Card

American Express

Visa

Discover

Card Number: _____ Expiration Date: _____

Check/Money Order Number: _____

Total Submitted: _____ Date: _____

Please submit your application along with payment to:

Kappa Alpha Psi® Fraternity, Inc.
International Headquarters
2322-24 North Broad Street
Philadelphia, PA 19132
Attn: Robert Peterson III
P: 215-228-7184 ext. 25, F: 215-228-7181
Email: rpeterson@kappaalphapsi1911.com

FOR OFFICE USE ONLY

Application approved

Application not approved: _____

Application Accepted by: Kappa Alpha Psi® Fraternity, Inc.

Robert Peterson III, Vendor Coordinator
Spencer T. Bruce, Interim Executive Director

Date: _____

License Number: _____

