

Employee Discount Program Vendor Request Form

Name of Business	
Name of Authorized Agent	
Phone Number	
Email Address	
Business Location	
Website Address	
Discount(s) Offered	
Please give a brief description of as you would like it to appear on	your discount offer, to include the dates within which it will be offered, our website:
	addition to a valid Charger Card, which will be required to obtain the
to all guidelines set out in the UAH I purchase to be made by or on beha have your product or service listed or result in a delay in processing your r Office about discontinuation, manu	orm for the UAH Employee Discount Program (EDP), you have read and agree EDP Policy. You also agree and understand that this is not a contract for any If of UAH. It is your responsibility to provide all the necessary information to on the website of the University. Failure to provide all such information could request. You agree to provide written notification to the UAH Human Resources facturer recalls, or any other information about your product or service that distent with the mission of the EDP program and/or values of UAH.
I certify that I am author	ized to submit this Vendor Request Form.
Authorized Signature	Date