

Date of Event: _____
Event Location: _____



CATERING EXCLUSION PERMIT Page 2 of 2

Terms and Conditions

- This form must be completed a minimum of four weeks prior to the event.
- The Food Service Operator is granted a limited permit for the distribution of food. This permit may be terminated or cancelled by University at any time, at its sole discretion, without recourse by the operator.
- The Food Service Operator must comply with all directives of University authorities.
- The Food Service Operator is solely responsible for the management, preparation, and distribution of its food; including set-up, service, supervision, take-down, clean-up, as well as all financial obligations and liabilities in connection with or necessitated by this permit.
- The Food Service Operator is responsible for providing any and all equipment and personnel necessary to conduct its business.
- The Food Service Operator is responsible for obtaining all required licenses or permits and fully complying with applicable federal, state, local laws and regulations as well as all pertinent University policies.
- The Food Service Operator shall defend, indemnify and hold harmless University, its officers, agents, and employees, from and against any and all claims, damages, costs, expenses, including reasonable attorneys' fees, losses, or liabilities, arising out of or in any way connected with this permit including, without limitation, claims for loss or damages to any property, or for death or injury to any person or persons.
- The Food Service Operator, at its sole cost and expense, must insure its activities; and provide the University with a certificate of insurance.
- The Food Service Operator may not assign or delegate this permit to any third party without specific written permission of the University.
- This permit is governed by and interpreted under the laws of the State of Minnesota.
- The agreement with Sodexo and Minnesota State University allows 5 exclusions to the contract each academic year. ALL exclusions must have Minnesota State University Cabinet approval.
- Future permission to engage in similar events is contingent upon compliance with these terms and conditions.

Food Service Operator Signature

As an authorized representative of the Food Service Operator, I agree to the Terms and Conditions governing the Dining Services Temporary Food Distribution Permit.

Food Service Operator's Signature Food Service Operator's Name (Print) Date
Required Document--to be submitted to University Dining Services with this permit application:
Food Service Operator's Certificate of Insurance

Campus Review and Approval

Sponsoring Organization's Vice President Date Sponsoring Organization's Advisor Date

MSU Cabinet Representative Signature MSU Cabinet Representative's Name (printed) Date

I certify that a copy of this Food Service Operator's certificate of insurance has been provided and this permit is hereby approved.

University Dining Services Signature University Dining Services Representative (Print) Date

OFFICE USE ONLY

Academic Year 2006-2007
Catering Exclusion Permit
Number ____ of 5

Copy sent electronically to:
Jonathan Kirchner,
Stacy Stoldorf, Sponsor Advisor,
Sponsor Contact

Date Sent _____ Initials _____