



College of Central FL Discount Program Vendor Application

New discount offer

Change to a current discount offer

VENDOR INFORMATION

Business / Company Name _____

Description of Business/Product/Service: _____

Business Address _____
Street

City _____ State _____ Zip _____

Web Address _____ Business Phone _____

DISCOUNT INFORMATION

(Note: Discount is offered to Faculty & Staff)

Discount offer (Include the discount dollar / percent offered, expiration date, restrictions, etc.)

Discount instructions (How to obtain the discount, show College of Central FL ID card, discount code, etc.)

College of Central FL does not endorse or recommend any individual, business or company by its inclusion in this program. College of Central FL reserves the right to decline an application should it be determined that the service(s) offered are not consistent with its mission, vision, or goals. College of Central FL reserves the right to refuse or discontinue participation eligibility in the Raider Discount Program without any notice to vendor based on unsuitability of goods / services or negative experiences as reported by users or for any reason as determined at the sole discretion of College of Central FL. Please sign and date below. By signing this form, you agree to offer College of Central FL Faculty & Staff a unique discount for services as listed above that are not part of a home-based business, in direct competition with College of Central FL, or what would be considered a normal part of College of Central FL employee benefits offering.

Full name / Title/Signature

Date

Please email completed form to: guessp@cf.edu or Fax to 352-873-5885

Information is for College of Central FL internal use only:

Contact Name / Title _____

Approved/Denied _____ Contact Phone _____ Date _____