|  |  |
| --- | --- |
| Contract # |  |

**LIMITED PERSONAL SERVICE CONTRACT**

**Northern Michigan University**

**Marquette, MI 49855**

**Northern Michigan University, hereinafter referred to as “University”, enters into this contract with:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Contractor Name: |  | | SS NO/FED ID NO | | |  | |
| Mailing Address: |  | | | | | | |
| City: |  | State: | |  | Zip Code: | |  |

|  |  |  |
| --- | --- | --- |
| U.S. Citizen: Yes:  No: | If no, Country of Citizenship: |  |
|  | If no, 30% U.S. Income Tax will be subtracted from your payment unless you have a green card. Contact Controller’s Office at (906) 227-1077 if you have any questions. | |

Incorporated: Yes:  No:

|  |  |
| --- | --- |
| Name of Payee if different from Contractor: |  |

DESCRIPTION OF SERVICES TO BE PERFORMED (CHECK ONE):

|  |  |  |  |
| --- | --- | --- | --- |
| Speaker/Lecturer | Performer | Professional Trainer – non academic credit only | |
| Athletic Official | Evaluator | Other |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date(s) |  | Time: |  | Place: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Compensation: Fees |  | Reimbursable Expenses |  |

CONTACT PERSONS FOR MATTERS RELATED TO THIS CONTRACT

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| For the Contractor | | | | | | |  | For the University | | | | | | | |
| Name: | |  | | | | |  | Name: | | |  | | | | |
| Address: | |  | | | | |  | Address: | | |  | | | | |
| City: |  | | State: |  | Zip: |  |  | City: |  | | | State: |  | Zip: |  |
| Phone: |  | | | | | |  | Phone: | |  | | | | | |

CONTRACTOR CERTIFIES THAT THE SOCIAL SECURITY OR FEDERAL EMPLOYER IDENTIFICATION NUMBER GIVEN ABOVE IS CORRECT

SIGNATURES

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| For the Contractor | |  | For the University | |
|  | |  |  | |
| Authorized Signature | Date |  | Authorized Signature | Date |
|  | |  |  | |
| Name and Title (printed or typed) | |  | Name and Title (printed or typed) | |

Contractor: Please sign and return original Contract to the University Contact Person identified above.

THIS FORM IS NOT TO BE USED TO CONTRACT WITH NMU EMPLOYEES OR SUTDENTS

**General Terms and Conditions**

1. It is understood that this contract is a contract for services and is not a contract for employment and that the said Contractor is not to be considered an employee of the University.
2. This contract is binding on both parties and it cannot be canceled except as follows: The University and Contractor mutually agree that either party may cancel this contract, and all parties shall be released from any liability or damages hereunder if the Contractor or University is unable to fulfill the terms of this contract due to an Act of God, or any other legitimate conditions beyond the control of the Contractor or University. If, for any reason beyond his/her control, the Contractor is delayed or cannot appear, he/she will use his/her best efforts to promptly notify the University and arrange for a change of date. It is agreed by Contractor that best efforts will be made to make mutually acceptable adaptations in order that the event may be held.
3. Contactor agrees to protect, save and hold harmless and indemnify Northern Michigan University against any and all liability whatsoever for injury to or death of any person or persons, or for loss of or damage to any property, occurring in connection with or in any way incident to this contract.