



Arizona Health-e Connection Vendor Supporter Agreement

This agreement is between Arizona Health-e Connection (AzHeC) and \_\_\_\_\_ (hereby referred to as "Vendor Supporter"), made on the \_\_\_ day of \_\_\_\_\_(month), \_\_\_\_\_(year).

The Vendor Supporter membership category allows companies involved in Health Information Technology (HIT) and Health Information Exchange (HIE) technology and services to support the activities of AzHeC. Vendor Supporter understands that it will receive recognition for its support of AzHeC, as listed in the Vendor Supporter Benefits description, which AzHeC in its discretion may change from time to time. This recognition may include listing the Vendor Supporter as an AzHeC Supporter on the AzHeC website, opportunities for presentations to the AzHeC membership, inclusion on AzHeC mailing lists, opportunities to sponsor AzHeC events, and discounted attendance at AzHeC events. Being a Vendor Supporter does not provide voting rights in AzHeC or eligibility to serve on the AzHeC Board.

Vendor Supporter acknowledges that, if AzHeC accepts its application as a Vendor Supporter, that acceptance does not imply AzHeC endorsement of the Vendor Supporter or its products or services. Vendor Supporter may not use the AzHeC name or logo without advance written permission by the AzHeC Executive Director. AzHeC and its officers, personnel, and agents are not obligated to review, recommend or purchase Vendor Supporter products or services.

AzHeC may terminate this agreement without cause, in which case AzHeC will refund the proportion of Vendor Supporter's annual dues pro rated for the remainder of the annual period. AzHeC may also terminate this agreement if Vendor Supporter breaches this agreement, in which case Vendor Supporter will not be entitled to the refund of any portion of its annual dues. Vendor Supporter may terminate this agreement at any time, in which case Vendor Supporter will not be entitled to the refund of any portion of its annual dues.

Vendor Supporter dues are \$2500, are paid annually and are not prorated.

The undersigned agree to abide by this agreement.

\_\_\_\_\_  
Bradley F. Tritle  
Executive Director  
Arizona Health-e Connection

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Organization

\_\_\_\_\_  
Date Signed