

Hospital Vendor Contract Summary Sheet

1. ☐ Existing Vendor ☒ New Vendor
2. **Name of Contract:** BioSense
3. **Contract Parties:** BioSense /MRMC
4. **Contract Type Services:** Facility Onboarding
5. **Impacted Hospital Departments:** Hospital
6. **Contract Summary:** This form is an registration form
7. **Cost:** \$0
8. **Prior Cost:** \$0
9. **Term:**
10. **Termination Clause:**
11. **Other:** Goes with our Syndromic Surveillance Program