

# Partnership Consulting Service Agreement

Date: [Insert Date]

Between:

[Consultant Name]  
[Consultant Address]  
[City, State, Zip Code]

And:

[Client Name]  
[Client Address]  
[City, State, Zip Code]

## 1. Scope of Services

The Consultant agrees to provide the following services: [Describe services in detail]

## 2. Duration of Agreement

This agreement shall commence on [Start Date] and shall continue until [End Date].

## 3. Payment Terms

The Client agrees to pay the Consultant [Payment Amount] upon [Payment Terms].

## 4. Confidentiality

Both parties agree to maintain confidentiality of all proprietary information exchanged during this agreement.

## 5. Termination

This agreement may be terminated by either party with [Notice Period] written notice.

## 6. Governing Law

This agreement shall be governed by the laws of [State/Country].

IN WITNESS WHEREOF, the parties hereto have executed this Consulting Service Agreement as of the date first above written.

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[Consultant Name, Title]

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[Client Name, Title]