

Non-Compete Partnership Agreement Form

Date:

DD/MM/YYYY

Location:

City, State

Parties

First Partner Name:

Full Name

Address:

Address

Second Partner Name:

Full Name

Address:

Address

Agreement Details

Nature of Partnership/Business:

Non-Compete Activities (describe prohibited activities):

Non-Compete Duration (e.g., 2 years):

Geographic Scope:

Additional Terms:

Agreement Effective Date:

DD/MM/YYYY

Signature of First Partner

Printed Name

Date

Signature of Second Partner

Printed Name

Date