

EAC (EXHIBITOR APPOINTED CONTRACTOR) INFORMATION FORM

PLEASE COMPLETE AND RETURN TO:

EMAIL: EAC@NAPEEXPO.COM

(PLEASE KEEP A COPY FOR YOUR RECORDS)

EXHIBITOR INFORMATION

EXHIBITING COMPANY NAME: _____ BOOTH #: _____

CONTACT NAME: _____ OFFICE PHONE: _____

EMAIL: _____ ONSITE PHONE: _____

ADDRESS: _____

IF YOUR COMPANY PLANS TO USE A CONTRACTOR WHO IS NOT THE OFFICAL SERVICE CONTRACTOR AS DESIGNATED BY SHOW MANAGEMENT, PLEASE COMPLETE THIS FORM AND RETURN TO THE E-MAIL LISTED ABOVE.

EAC INFORMATION

EAC COMPANY NAME: _____

EAC CONTACT NAME: _____

EAC E-MAIL: _____ PHONE: _____

EAC ADDRESS: _____

SERVICE TO BE PERFORMED _____

INFORM YOUR EAC THAT THEY MUST SEND A COPY OF A GENERAL LIABILITY INSURANCE CERTIFICATE WITH MINIMUM POLICY LIMITS OF \$1,000,000 PER OCCURRENCE AND \$2,000,000 AGGREGATE NAMING NAPE EXPO LP (800 FOURNIER STREET FORT WORTH, TX 76102) AND THE GEORGE R. BROWN CONVENTION CENTER (1001 AVENIDA DE LAS AMERICAS, HOUSTON, TX 77010) AS ADDITIONAL INSURED ALONG WITH A COPY OF THIS FROM NO LATER THAN 14 DAYS PRIOR TO SHOW DATE OR THEY WILL NOT BE PERMITTED TO SERVICE YOUR EXHIBIT.

IT IS THE RESPONSIBILITY OF THE EXHIBITOR TO SEE THAT EACH REPRESENTATIVE OF A NON-OFFICIAL CONTRACTOR ABIDES BY THE OFFICAL RULES AND REGULATIONS OF THIS EVENT.