MAYO CIVIC CENTER EXHIBITOR APPOINTED CONTRACTOR (EAC) FORM



Exhibitors who plan to use an Exhibitor Appointed Contractor (EAC) other than the appointed contractor, must provide the Mayo Civic Center with the following information prior to move-in

Company:	
, ,	
	Zip Code:
	Title:
Phone:	Email:
•	orized the Exhibitor Appointed Contractor, named above,
to install and dismantle r	my exhibit at the (event name) , on
(event dates)	Knowing that the contractor is my official
representative, I further	certify that the contractor will adhere to all show and
facility rules and regulati	ions, as well as the regulations set forth by the
Occupational Safety and	Health Administration (OSHA), as if my own employee. I
understand that my com	pany is ultimately responsible for the actions of the
contractor while on this	assignment, and may not hold the Mayo Civic Center, nor
its' staff, accountable for	r any injuries or accidents that occur on the premises.
	orized to use any facility equipment without consulting
the Mayo Civic Center te	
EXHIBITING COMPANY	(
Company:	
	Title:
	Email:
Signature:	Date:
. •	EAC's Certificate of Insurance, must be submitted to
exhibitorservices@mayo	<u>civiccenter.com</u> before (deadline)