



## CONTRACTOR ONLY—EAC

The Exhibitor Appointed Contractor must submit its Certificate of Insurance (COI), valid for E3 2016, to Show Management by **April 25, 2016**. The COI must name AEG Management LACC, LLC, the City of Los Angeles, GES Expositions Services, ESA and Show Management, as well as their respective parents, subsidiaries, affiliates, licensees, lenders, contractors, partners, members, shareholders, officers, agents, representatives, directors, employees, successors and assigns along with the exhibiting company and booth number. All EAC companies must fill out this form and return to Show Management.

**If Show Management has not received your insurance certificate prior to Move-In, the EAC will not be allowed access to the exhibit floor.**

### **Exhibitor Appointed Contractor Information**

*Please check type of EAC you represent:*

- |                                           |                                                           |
|-------------------------------------------|-----------------------------------------------------------|
| <input type="checkbox"/> Audio-Visual     | <input type="checkbox"/> Computer                         |
| <input type="checkbox"/> Internet         | <input type="checkbox"/> Design house (not including I&D) |
| <input type="checkbox"/> I & D Contractor | <input type="checkbox"/> Other_____                       |

Independent Contractor/Display House:\_\_\_\_\_

Contractor Contact Name:\_\_\_\_\_

On-site Contact Name (if different): \_\_\_\_\_

Address:\_\_\_\_\_

City:\_\_\_\_\_State:\_\_\_\_\_Zip:\_\_\_\_\_

Telephone:\_\_\_\_\_Fax:\_\_\_\_\_

Email:\_\_\_\_\_

Please provide show management with a list of your Supervisors name(s) for on-site contacts:

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

5. \_\_\_\_\_

### **Exhibitor Information**

Company: \_\_\_\_\_ Booth #: \_\_\_\_\_ Total Sq. Ft.: \_\_\_\_\_

**Please E-Mail or Mail this form by April 25, 2016 to:**

Attn: Mariella Ley/Alida Roberts

**E3 2016**

c/o IDG World Expo

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