



## SERVICE KIT RECEIPT AND SET UP QUESTIONNAIRE

### Immediate Action Required!

Please complete this form to confirm receipt of this Exhibitor Service Manual and help the exposition run more smoothly. Return completed form to HFTP **IMMEDIATELY**.

*Please print or type.*

Company Name \_\_\_\_\_ Booth Number(s) \_\_\_\_\_

Contact person from your company that **will attend** HITEC \_\_\_\_\_

Cell phone: (\_\_\_\_) \_\_\_\_\_ E-Mail: \_\_\_\_\_

SET UP: Our display installation and dismantle will be handled in the following manner:

☐ We will use our full-time employees. **OR**

☐ We will request the services of GES Exposition Services, the official show contractor. **OR**

☐ We will use the services of the following exhibitor appointed contractor:

Contractor \_\_\_\_\_

Contractor Representative \_\_\_\_\_

Phone number (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Is the above company authorized to order show services on your behalf? ☐ Yes ☐ No

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Exhibitor Appointed Contractor Insurance Requirements:** Independent service contractors, other than GES, must provide a certificate of insurance to both Show Management and GES Exposition Services by **May 18, 2016**. Hospitality Financial and Technology Professionals (show management), GES Exposition Services, NEW ORLEANS ERNEST N. MORIAL CONVENTION CENTER and HITEC 2016 must be named as additional insureds.

**Minimum Coverage Requirements:** **1)** Commercial General Liability with limits of not less than \$1,000,000 each occurrence, \$2,000,000 general aggregate and \$2,000,000 products & completed operations aggregate; **2)** Umbrella/Excess Liability with a limit of not less than \$1,000,000 each occurrence; **3)** Workers' Compensation with Employers Liability limits of not less than \$1,000,000 each accident, \$1,000,000 disease-each employee and \$1,000,000 disease-policy limit; and **4)** Automobile Liability with a limit of not less than \$1,000,000 combined single limit – each accident.

**Return form ASAP to:** Hospitality Financial and Technology Professionals  
11709 Boulder Lane, Suite 110  
Austin, TX USA 78726

Email to [alison.heathcote@hftp.org](mailto:alison.heathcote@hftp.org) or fax to +1 (512) 249-1533