

Please return form to:

FREEMAN	
9900 BUSINESS PARKWAY	
LANHAM, MD 20706	
Attn: EXHIBITOR SERVICES	
Phone: 301-918-7975	Fax: 469-621-5609

NAME OF SHOW: **ELECTRIC POWER 2010 / MAY 18 - 20, 2010**

EXHIBITING COMPANY NAME: _____ BOOTH #: _____

PRINT NAME: _____ BOOTH SIZE: _____ X _____

SIGNATURE: _____ DATE: _____

If your company plans to use a firm which is not the official service contractor as designated by Show Management, please complete this form and mail to the address listed above.

Company Name: _____ Booth No.: _____

Contact at Show: _____

Exhibitor Appointed Contractor: _____

Address of Contractor: _____

Type of Service to be Performed: _____

*Inform your **Exhibitor Appointed Contractor** that they **MUST** send a copy of their General Liability Insurance Certificate no later than **30 days** prior to the first day of exhibitor move-in or they will not be permitted to service your exhibit.*

It is the responsibility of the exhibitor to see that each representative of an Exhibitor Appointed Contractor abides by the official rules and regulations of this event.

This form must be received 30 DAYS PRIOR TO THE FIRST DAY OF EXHIBITOR MOVE-IN.

NOTIFICATION OF INTENT TO USE EAC