



**NOTICE OF INTENT TO USE EXHIBITOR APPOINTED CONTRACTOR(S)  
DEADLINE DATE: Friday, January 19, 2024**

**Please fill out this form ONLY if you plan to use labor other than that provided by the official service contractor, Freeman Exposition Services.**

We have contracted with the following firm to install and/or dismantle our exhibit display at the  
**AASA 2024 National Conference on Education:**

SERVICE COMPANY NAME: \_\_\_\_\_

PRINCIPLE CONTACT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

It is understood that the above contractor will service and maintain insurance coverage as follows:

- a) Workman's Compensation insurance in the minimum amounts required by the laws of the State of Texas.
- b) Comprehensive General Liability insurance with minimum combined single limits of \$1,000,000 for bodily injury and/or property damage in any once occurrence.

Such insurance must be maintained in full force during the period when exhibitor appointed contractor is working on the display at the AASA Conference on Education in San Diego, CA.

**The exhibitor appointed contractor must furnish Show Management with an original certificate of insurance attesting to these coverages. The exhibitor appointed contractor will not be allowed to work at the show until Show Management has received this form and an original certificate of insurance.**

EXHIBITING COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ BOOTH NUMBER: \_\_\_\_\_

AUTHORIZED SIGNATURE: \_\_\_\_\_

**RETURN FORM TO:**  
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