



### Exhibitor Appointed Contractor (EAC) Request Form

**Deadline: October 6, 2023**

- An Exhibitor Appointed Contractor (EAC) is any contractor other than the Official Contractor providing a service to an Exhibitor within his exhibit space, including (but not limited to) Models, Photographers, Florists, etc. as well as Installation/Dismantling Labor. Exhibitors wishing to get approval to use an EAC must fill out this form and return it to WMA along with an original certificate of insurance prior to the above deadline. (See sample certificate of insurance that follows.)
- For services such as electrical, plumbing, telephone, rigging, material handling (including all movement of material and equipment) booth cleaning and catering, no exception will be made, and the Official Contractor must be used.

Exhibiting Company Name: \_\_\_\_\_

Booth No.: \_\_\_\_\_ Form Submitted By: \_\_\_\_\_

Authorization Signature: \_\_\_\_\_

Exhibitor Appointed Contractor: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Type of Work: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**Return to: World Millwork Alliance**  
 Attn: Show Management  
 10047 Robert Trent Jones Parkway  
 New Port Richey, FL 34655  
 Phone: (727) 372 – 3665  
**Fax: (727) 372-2879**  
 Email: [asmith@WorldMillworkAlliance.com](mailto:asmith@WorldMillworkAlliance.com)



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WMA 2023 Annual Convention and Tradeshow

## Using Exhibitor Appointed Contractor's (EACs) & Labor

An Exhibitor Appointed Contractor (EAC) is any contractor other than an Official Contractor that provides a service to an Exhibitor within his exhibit space. EAC's are independent contractors hired by exhibiting companies to perform services such as labor to build or dismantle their booth, booth supervision, booth design, independent display companies, delivery personnel, technicians, etc. An EAC will be granted access to the exhibit floor ONLY if the *EAC Request Form* and *Certificate of Insurance* have been received and approved by the World Millwork Alliance (WMA), Show Management; and the EAC has met the WMA badging requirements. No exceptions.

An Exhibitor setting up his/her own booth must provide 'Exhibitor' badges for set-up and dismantling personnel.

### How to register your EAC

**1. Submit an EAC request form to WMA.** This completed form must come from the exhibiting company and not from the Exhibitor Appointed Contractor.

**2. Submit an original Certificate of Insurance to WMA. Fax copies are NOT acceptable.** A sample **Certificate of Insurance** is located in the back of this section. The **EAC MUST submit** (to WMA) a written statement setting forth the identity and intended use of the EAC, The Certificate of Insurance is a General Liability Insurance Certificate naming **World Millwork Alliance; its Directors, Officers, Agents and Employees; the Kentucky State Fair Board and Kentucky Venues, its members, directors, officers, employees, and agents; and Freeman as additional insured** from **October 20-25, 2023**. The EAC shall, at its sole cost and expense, procure and maintain through the term of the 2023 WMA Annual Convention & Tradeshow, evidence of workers' compensation insurance in the minimum amount of one million dollars (\$1,000,000) covering all operations; and automobile liability insurance in a minimum amount of one million dollars (\$1,000,000) covering all owned, hired, and non-owned vehicles.

The EAC shall, at its sole cost and expense, procure and maintain through the term of the 2023 WMA Annual Convention & Tradeshow, comprehensive general liability insurance against claims for Bodily Injury and Property Damage occurring in or upon or resulting from the premises leased by WMA. Such insurance shall include contractual liability and product liability coverage, with combined single limits of liability of not less than \$1,000,000.

If WMA does not receive a Certificate of Insurance, it will be required that the exhibiting company and an exhibitor appointed contractor purchase insurance coverage with Rain Protection.

**3. Official Contractor must be notified.** Exhibitors using agent representatives, for whom a request for exception has been made and approved by WMA, must supply the Freeman Companies with an address and phone number. If the EAC will order services on behalf of an exhibitor, the exhibitor must also provide Freeman with the Third-Party Authorization Form located in the Order forms section.

### EAC approval is subject to the following:

1. Approval will be granted only in cases where permission has been requested in writing by the Exhibitor using the appropriate request form emailed or mailed to: **World Millwork Alliance, 10047 Robert Trent Jones Parkway, New Port Richey, FL 34655, no later than October 6, 2023**. Any request received after this date will be on a supervision basis only, in which case the Exhibitor must use the Official Contractor's labor.
2. The unpacking, erection, assembling, dismantling, and packing of displays and equipment must be done by the correct type of Union labor.
3. All contractors must use union labor and abide by union jurisdiction in force at the time of the Exposition. An exception will be granted only if it will not interfere with or prejudice the orderly setting up, interim services, or dismantling of the Exposition. An exception will not be granted if it is inconsistent with the commitments and obligations assumed by the WMA in its agreement with the lessor of the exhibition space or in any contract with the Official Contractors. For services such as electrical, plumbing, telephone, rigging, material handling (including all movement of material and equipment), and booth cleaning, the Official Contractor must be used. No exceptions.

### **Badges for EAC Personnel**

**Set Up Badges** - WMA requires all EAC personnel to wear a WMA “set up” badge to gain access to the exhibit floor and must abide by the WMA exhibitor rules and regulations and Kentucky International Convention Center. Hall security will not allow access into the exhibit hall without an approved WMA badge. Special designated “set up” badges are available at the WMA registration desk.

### **Rules Governing Use of EAC’s**

Should you use the services of an Exhibitor Appointed Contractor (EAC), the following requirements must be complied with:

1. If you use an EAC (someone other than Freeman Decorating Company) to install and dismantle your display, please be sure that they are aware of the Exhibitor Set-up and Dismantling dates. This schedule will be strictly enforced.
2. EAC’s must not solicit business on the show floor and must confine their work to the exhibit area of their client(s).
3. EAC’s must comply with labor agreements and practices and must not commit any acts that could lead to work stoppages, strikes, or labor problems.
4. Exhibitors are liable for restoring their exhibit area to its original condition (i.e. free of tape and other remnants of use.)
5. EAC’s used to set-up your display must be familiar with the installation and dismantling section of the show Exhibitor Service Kit.
6. It is the Exhibitor’s responsibility to ensure the EAC understands and abides by the days and times for setup and teardown of a display.
7. It is the Exhibitor’s responsibility to advise its Exhibitor Appointed Contractor (EAC) of all the information provided above. Each exhibitor that is using an EAC is advised to request that a copy of the Exhibitor Service Kit be sent to the EAC or be accessed from Freeman.



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## Sample Certificate of Insurance

An **original** certificate of insurance which conforms to the standards indicated below must be submitted by all exhibitors requesting approval for an EAC. **These forms must also include National Glass Build. Original Forms need to be mailed to: World Millwork Alliance, ATTN: Show Management, 10047 Robert Trent Jones Parkway, New Port Richey, FL 34655 before October 6, 2023.**

\* NOTE: ALL DATES MUST INCLUDE COVERAGE DURING MOVE-IN, SHOW DAYS AND MOVE-OUT (October 22 – 25, 2023).

**CONTRACTOR'S  
INSURANCE  
COMPANY  
ISSUING THIS  
CERTIFICATE**

**CONTRACTOR'S  
COMPANY NAME,  
SUBSIDIARY NAMES,  
OR D.B.A. NAMES  
AND ADDRESS**

**\*POLICY NUMBERS**

**\*POLICY DATES FROM/TO**

**POLICY NUMBERS**

**\*POLICY DATES FROM/TO**

**MUST BE INCLUDED**

**ACORD® CERTIFICATE OF LIABILITY INSURANCE** DATE (MM/DD/YYYY) 12/1/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement of this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER: \_\_\_\_\_ CONTACT NAME: \_\_\_\_\_ PHONE (A/C, No. Ext): \_\_\_\_\_ FAX (A/C, No): \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_ INSURER(S) AFFORDING COVERAGE: \_\_\_\_\_ NAIC #: \_\_\_\_\_

INSURED: \_\_\_\_\_ ENDUPRO-01 INSURER A: \_\_\_\_\_ INSURER B: \_\_\_\_\_ INSURER C: \_\_\_\_\_ INSURER D: \_\_\_\_\_ INSURER E: \_\_\_\_\_ INSURER F: \_\_\_\_\_

**COVERAGES** CERTIFICATE NUMBER: 1231585313 REVISION NUMBER: \_\_\_\_\_

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTRA	TYPE OF INSURANCE	ADDITIONAL INSURANCE	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXPI (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO <input type="checkbox"/> LOC OTHER: _____	<input type="checkbox"/> Y <input type="checkbox"/> N				EACH OCCURRENCE DAMAGE TO RENTED PREMISES (EA occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY	<input type="checkbox"/> Y <input type="checkbox"/> N				COMBINED SINGLE LIMIT (EA accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY	<input type="checkbox"/> Y <input type="checkbox"/> N				COMBINED SINGLE LIMIT (EA accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
C	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE  DED: _____ RETENTION \$: \$1,000	<input type="checkbox"/> Y <input type="checkbox"/> N				EACH OCCURRENCE AGGREGATE
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A  If yes, describe below	<input type="checkbox"/> Y <input type="checkbox"/> N				<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH- ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) World Millwork Alliance; its Members, Directors, Officers, Agents, and Employees. National Glass Association Las Vegas Convention Center						
CERTIFICATE HOLDER World Millwork Alliance 10047 Robert Trent Jones Pkwy. New Port Richey FL 34655 USA				CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE: _____		

**ADD NAMES**