Notice of Intent to use Exhibitor Appointed Contractor(s)

DEADLINE DATE: Wednesday, October 7, 2026

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

We have contracted with the following firm to install and/or dismantle our exhibit display at IAUG Converge:

SERVICE COMPANY NAME:	
PRINCIPLE CONTACT:	
STREET ADDRESS:	
CITY, STATE, ZIP:	
PHONE:	
EMAIL:	

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

Workman's Compensation insurance in the minimum amounts required by the laws of the State of Georgia.

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 during the period when exhibitor appointed contractor is working on the display at IAUG Converge in Savannah, Georgia. The exhibitor appointed contractor must furnish show management with an original certificate of insurance (COI) 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 (COI.)

EXHIBITING COMPANY:			
BOOTH NUMBER:			
STREET ADDRESS:			
CITY, STATE, ZIP:			
PHONE:		FAX:	
EMAIL:			
AUTHORIZED SIGNATURE:			

Please return form to Alaina Aldis, Events & Fulfillment Associate
partnersupport@iaug.org