



Discount Deadline: Wednesday, July 9, 2025

Exhibitors Only - EAC Information Form

| | |
|--------------|---------|
| Company Name | Booth # |
|--------------|---------|

If an exhibitor plans to use an outside contractor other than the "Official Service Contractor" please list below the non-official contractor's company name, contact name, phone number and email.

The Exhibitor Appointed Contractor (EAC) must have all business licenses, permits and Workman's Compensation insurance required by the State and City governments and the facility prior to commencing work, and shall provide TriCord evidence of compliance.

The Exhibitor Appointed Contractor (EAC) must carry a minimum insurance coverage of \$1,000,000.00 in commercial general liability insurance, \$500,000.00 in property damage, and \$1,000,000.00 in worker's compensation coverage and must provide TriCord with a certificate of insurance (COI) showing coverage and amounts 30 days prior to the first day of exhibitor move in.

Please make sure the show name, dates, facility and client's name are listed on the Certificate of Insurance as well as TriCord Tradeshow Services named as additional insured. See the sample COI on the following page. All Exhibitor Appointed Contractors must be aware and abide by all union rules and regulations.

PLEASE EMAIL OR MAIL TO TRICORD TRADESHOW SERVICES -
orders@tricord.net or 738 Neeson Road, Marina, CA 93933

30 DAYS PRIOR TO THE FIRST DAY OF EXHIBITOR MOVE IN

Exhibiting Company Authorization of Third Party Billing

| | |
|-----------|--------------|
| Address | City |
| State/Zip | Phone # |
| Email | Main Contact |
| Signature | Print Name |

Exhibit Appointed Contractor Information

Please list below your Exhibitor Appointed Contractors (EAC) information:

| | Company | Contact Name | Phone | Email |
|----|---------|--------------|-------|-------|
| 1. | _____ | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ | _____ |
| 4. | _____ | _____ | _____ | _____ |
| 5. | _____ | _____ | _____ | _____ |

Please note that TriCord is not responsible for any change or mark ups to our pricing from EAC companies.
Our prices are all listed in the Exhibitor Kit and all exhibitors have access to review our pricing.



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Third Party Authorization

| | |
|--------------|---------|
| Company Name | Booth # |
|--------------|---------|

IMPORTANT INFORMATION

Exhibitors may arrange for a third party to handle their display and be charged for services.

TriCord Tradeshow Services will agree to this arrangement if the third party has a credit card on file.

Both firms must complete this form, including the Third Party Credit Card Charge Authorization below, and return the form by the deadline of:

Wednesday, July 9, 2025

It is understood and agreed that the exhibiting company is ultimately responsible for payment of charges. If your named third party does not pay the invoice before the last day of the show, charges will default to the exhibiting company. All invoices are due and payable upon receipt.

Exhibiting Company Authorization of Third Party Billing

| | |
|--------------|--------------|
| Company Name | Main Contact |
| Signature | Date |
| Phone # | Email |

Credit Card Information

| | | |
|----------------------|--------------|--------------------|
| Company Name | Main Contact | |
| Signature | Date | |
| Phone # | Email | |
| Credit Card Number | | |
| Card Type | Expiration | CCID/Security Code |
| Billing Address | | |
| City | State | Zip Code |
| Authorized Signature | | |
| Print Name | | |

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