

Please return form to:

CASE MGMT SOC OF AMERICA
DONNA LOPORTO
6201 RANCH DRIVE
LITTLE ROCK, AR 72223
501-673-1116
dloporto@fraserimageers.com

DEADLINE DATE
May 5, 2019

NAME OF SHOW: CMSA'S 29TH ANNUAL CONFERENCE / JUNE 10-14, 2019

COMPANY NAME _____ BOOTH #: _____

CONTACT NAME: _____ PHONE #: _____

E-MAIL ADDRESS _____



If your company plans to use a firm who is not an 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: _____

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