

Health and Safety and Insurance Declaration (to be completed by <u>all</u> Exhibitors)

Company Name Tendercore htd.	
Stand No 1 1 1 + 2	
The Health and Safety at Work Act, etc, 1974 (HASAWA74) It is a condition of entry into the exhibition that every Exhibitor, Contractor, sub-Contract and their agents comply with the HASAWA74 and all other legislation covering the venue accepts that it is their legal and moral responsibility to ensure that their own and others' safety is not put at risk by their actions (or inactions) throughout tenancy. The exhibitor costaff will be sufficiently instructed and trained in relevant matters in order to carry out the competently:	. The Exhibitor health and onfirms that its
Make one clear selection between YES or No.	
YES/NO We are SHELL SCHEME and are using the PMG recommended contractors. We hand made our stand staff aware of the potential risks present onsite and we will copy the additional safety information. We will complete and return a risk assessment by Friday 2 Any significant risks caused by our exhibits, demonstrations and work practises to either others onsite are detailed on the form OR if our exhibits, demonstrations and work practi HAZARD to either ourselves or others onsite our risk assessment form will be marked clear LOW RISKS'	m in with any October 2020 ourselves or ses cause NO
YES/NO - We are <u>SPACE ONLY.</u> My principal contractor(s) (named below) has undertaken Assessment for this event in accordance with the HASAWA74. They have trained and noticand sub-contractors in all such areas identified as being of risk. A copy will be forwarded to Organisers by Friday 2 October 2020.	fied their staff
Stand contractor 1	
Company Contact Name Address Tel Email	
Stand contractor 2	
Company	



Insurance and Public Liability

I confirm that we have adequate public liability insurance in place to protect ourselves against any loss or damage to our stand, exhibits, property and personnel and for any legal liability incurred in respect of injury or damage to persons or property belonging to third parties.

Health and Saf	ety Representative or	n the stand will be	Flick	Stothard,
Position	•			Madelman III.
Mobile No	07887	いつナインイ	·	
Declaration				
Authorised by_	Amanda Mg 2020 Amanda	a Adam	<u> </u>	
Date 81	- M= 2020)		
Print Name	Amanda 1	Adams		
	Director			

Please return to pmg@conferencecollective.co.uk by Friday 2 October 2020.