

2024 EXHIBITOR APPOINTED CONTRACTOR (EAC) RULES AND REGULATIONS AND APPLICATION FOR APPROVAL

Unified Wine & Grape Symposium
January 23 - 25, 2024 (Exhibits: January 24 & 25)
Policy Coverage Dates: January 21 - 26, 2024
SAFE Credit Union Convention Center, Sacramento, California, USA



If an exhibitor chooses to employ an Exhibitor Appointed Contractor (EAC), the EAC must sign this agreement and pay a \$100 fee per booth they are contracted to install and/or dismantle. **The signed agreement and fee must be received no later than January 5, 2024.**

An EAC is defined as any company, other than the Official Contractor, Freeman, used by an exhibitor inside the exhibit hall.

- (1) The EAC must maintain and provide proof of insurance through the terms of the 2024 UW&GS as outlined in this Exhibit D of the 2024 UW&GS Application/Agreement for Exhibit Space. A certificate of liability insurance for no less than \$2,000,000 U.S. per occurrence and an additional insured endorsement (CG2026) must be provided to the UW&GS, LLC.
- (2) The EAC agrees that they will work in the hall only between the hours specified by the UW&GS and Freeman and will abide by all badging rules established by UW&GS.
- (3) The EAC is not allowed on the show floor during show hours as an additional safety and security measure.
- (4) The EAC is permitted to store equipment in the exhibitor's booth during installation and dismantle only.
- (5) The EAC may not operate a service desk within the exhibit hall. The EAC must confine its operations within the exhibitor's booth space.
- (6) EACs and exhibitors are not permitted to have electric carts or scooters in the building at any time.
- (7) The operation or use of motorized or mechanical material handling equipment or lifts by exhibitors or their appointed contractors is prohibited.
- (8) Cameras or photography are prohibited on the exhibit floor without permission from UW&GS.
- (9) The EAC affirms that they have confirmed work orders from all contracted exhibitors and will not in any manner solicit work from other exhibitors or booths under any circumstances.
- (10) The EAC under no circumstances will be allowed to remove floor marking tape until the close of the exposition.
- (11) The EAC must abide by the fire and safety and exhibit hall regulations.
- (12) All booth designs and structures must conform to the rules and regulations in the exhibitor service manual.
- (13) The EAC agrees to abide by all existing union contracts, regardless of dispute from a prior work engagement. Any dispute causing injury of any kind to UW&GS, its agents, contractors, exhibitors or attendees will be the full responsibility of the EAC including, but not limited to, all consequential damages arising out of such a dispute.
- (14) The EAC must meet all venue and general service contractor requirements in order to participate in the UW&GS.
- (15) The EAC agrees to pay all reasonable costs incurred by the UW&GS official service contractor (Freeman) in connection with the EAC's operation that would not have been incurred otherwise.
- (16) UW&GS has no responsibility whatsoever for any property at the event or any financial obligation of the EAC under any circumstances.
- (17) The UW&GS reserves the right, in its sole discretion, to withhold approval or to dismiss from the show, any service contractor whose participation in the show may, in the opinion of show management, lead to strikes, picketing, other labor action directed at the show, other disruption of the show, noncompliance with the Freeman exhibitor manual or the UW&GS 2024 Exhibitor Application/Agreement, or interference with any of the exhibitors.

EAC (Indemnitor) agrees to indemnify, hold harmless and defend Unified Wine & Grape Symposium, LLC, its members the American Society for Enology and Viticulture and the California Association of Winegrape Growers, the City of Sacramento, Visit Sacramento, Freeman, Convention Management Resources and their respective directors, officers, members, agents, employees, volunteers, successors and assigns (collectively "Indemnitee"), from and against any and all liabilities, damages, actions, costs, losses, claims and expenses (including all attorneys' fees, court cost and litigation expenses), on account of injury, death, loss or damage to persons, property or profits arising out of or resulting in whole or in part from any act, omission, negligence, fault or violation of law or ordinance by EAC or its officers, directors, employees, members, partners, its parent and/or subsidiary, successors, assigns, agents, affiliates, sub-contractors, guests, or invitees.

**2024 EXHIBITOR APPOINTED CONTRACTOR (EAC)
ACCEPTANCE OF TERMS & CONDITIONS AND
INFORMATION & CREDIT CARD AUTHORIZATION FORM**



Unified Wine & Grape Symposium
January 23 - 25, 2024 (Exhibits: January 24 & 25)
Policy Coverage Dates: January 21 - 26, 2024
SAFE Credit Union Convention Center, Sacramento, California, USA

**PLEASE COMPLETE, SCAN, AND RETURN THE FOLLOWING FORM TO:
info@unifiedsymposium.org no later than January 5, 2024.**

EAC INFORMATION

EAC Company Name: _____

EAC Contact name and title: _____

EAC Company: _____





EAC Full Address: _____

EAC Telephone Number: _____

EAC Contact Email Address: _____

Exhibiting Company Name: _____	Exhibiting Company Booth Number: _____
Exhibiting Company Name: _____	Exhibiting Company Booth Number: _____
Exhibiting Company Name: _____	Exhibiting Company Booth Number: _____
Exhibiting Company Name: _____	Exhibiting Company Booth Number: _____
Exhibiting Company Name: _____	Exhibiting Company Booth Number: _____

EAC CREDIT CARD INFORMATION

Accepted credit cards    

Card Number _____ Expiration Date _____ CVC Code _____

Billing address _____ City, State _____ Zip code _____

Total amount to be charged = \$100.00 (USD) x _____ (Number of Exhibiting Companies contracted by EAC)

_____ Please Print Cardholder's Name _____ Authorized Signature (Authorizes Charge on Credit Card)

REFUNDS WILL NOT BE ISSUED

Acceptance of Terms and Signature

I agree to the Terms & Conditions delineated in the 2024 EAC (Exhibitor Appointed Contractor) Rules and Regulations and Application for Approval

_____ AUTHORIZED SIGNER _____ DATE

2024 Liability Insurance Certificate

& Additional Insured Endorsement Requirements

Certificate of Liability Insurance Sample

Please submit your Certificate of Liability Insurance with your Additional Insured Endorsement Form issued for your current Commercial General Liability (CGL) policy. All sections must be completed as done in the example and in English.

Please submit your certificate of liability insurance with the following requirements:

- 1 Minimum insurance limits in US Dollars as listed.
- 2 Insurance Company must be located and licensed to do business in the USA.
- 3 The EAC must be listed as the Insured Name on the certificate
- 4 Occur box must be selected for Type of Insurance.
- 5 Additional Insured box must be selected.
- 6 Policy number for each type of Insurance (General Liability, Automobile Liability & Workers Compensation).
- 7 Policy period for each type of insurance must cover the dates of the show week (January 21 - 26, 2024).
- 8 Automobile Liability minimum insurance limit is in US dollars as listed.
- 9 Workers Compensation insurance as required by California Law.
- 10 Name event, dates and endorsement form #.
- 11 Additional insured endorsement (Form CG 2026) must be attached to the certificate (see next page for sample).

ACORD®				CERTIFICATE OF LIABILITY INSURANCE		DATE (MM/DD/YYYY)	
<p>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.</p> <p>IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).</p>							
PRODUCER Insurance Agent Name/Address				CONTACT NAME: PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL: ADDRESS:		INSURER(S) AFFORDING COVERAGE INSURER A : Insurance Company Name	
INSURED (AS NAMED IN POLICY) Insured Name/Address				INSURER B : INSURER C : INSURER D : INSURER E : INSURER F :		NAIC #	
COVERAGES		CERTIFICATE NUMBER:		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 LTR	TYPE OF INSURANCE	ADD'L SUBR INSR. W/VD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> GEN'L AGGREGATE LIMIT A PER: POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	<input checked="" type="checkbox"/> <input type="checkbox"/>	(Policy Number Mandatory)	(Policy term must cover event dates)	Current Policy Period	EACH OCCURRENCE \$1,000,000	1
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NOT-OWNED AUTOS	<input type="checkbox"/> <input type="checkbox"/>	(Policy Number Mandatory)	(Policy term must cover event dates)	Current Policy Period	COMBINED SINGLE LIMIT (Ea accident) \$2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$	8
	UMBRELLA LIAB EXCESS LIAB DED. RETENTION \$	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE				EACH OCCURRENCE \$ AGGREGATE \$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICEMEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A	(Policy Number Mandatory)	(Policy term must cover event dates)	Current Policy Period	WC STATU-TORY LIMITS E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$	9
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)							
Unified Wine & Grape Symposium at SAFE Credit Union Convention Center, January 21 - 26, 2024. Additional insureds per endorsement CG 2026 attached. This insurance shall be primary and non-contributory.							
CERTIFICATE HOLDER				CANCELLATION			
Unified Wine & Grape Symposium, LLC PO Box 1855 Davis, CA 95617-1855				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			
© 1988-2010 ACORD CORPORATION. All rights reserved.							
ACORD 25 (2010/05)		The ACORD name and logo are registered marks of ACORD					

These requirements are per your application terms.

Submit Certificate with Endorsement to:

Unified Wine & Grape Symposium, LLC
 PO Box 1855, Davis, CA 95617 USA
 Phone: 530-753-3142 • Fax: 530-601-5317
 Email: insurance@unifiedsymposium.org

2024 Liability Insurance Certificate

& Additional Insured Endorsement Requirements

Additional Insured Endorsement CG 2026 Sample

Please submit your Additional Insured Endorsement Form with your Certificate of Liability Insurance issued for your current CGL policy. All sections must be completed as shown in the example.

Your Additional Insured Endorsement Form CG 2026 must list the following:

1. Unified Wine & Grape Symposium, LLC
2. The City of Sacramento
3. Visit Sacramento
4. Freeman
5. Convention Management Resources

These requirements are per your application terms.

The event will be held at SAFE Credit Union Convention Center, 1400 J Street, Sacramento, CA 95814

POLICY NUMBER: (Policy Number Mandatory)	COMMERCIAL GENERAL LIABILITY CG 20 26 04 13
THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.	
ADDITIONAL INSURED - DESIGNATED PERSON OR ORGANIZATION	
This endorsement modifies insurance provided under the following:	
COMMERCIAL GENERAL LIABILITY COVERAGE PART SCHEDULE	
Name Of Additional Insured Person(s) Or Organization(s):	
Unified Wine & Grape Symposium, LLC; The City of Sacramento; Visit Sacramento; Freeman; Convention Management Resources	
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	
A. Section II - Who Is An Insured is amended to include as an additional insured the person(s) or organization (s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf: <ol style="list-style-type: none"> 1. In the performance of your ongoing operations; or 2. In connection with your premises owned by or rented to you. However: <ol style="list-style-type: none"> 1. The insurance afforded to such additional insured only applies to the extent permitted by law; and 2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured. 	
B. With respect to the insurance afforded to these additional insureds, the following is added to Section III - Limits Of Insurance: <p>If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:</p> <ol style="list-style-type: none"> 1. Required by the contract or agreement; or 2. Available under the applicable Limits of Insurance shown in the Declarations; whichever is less. This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.	

Note: Your insurance carrier must be located in and licensed to do business in the U.S.A

Submit Endorsement with Certificate to:

Unified Wine & Grape Symposium, LLC
 PO Box 1855, Davis, CA 95617 USA
 Phone: 530-753-3142 • Fax: 530-601-5317
 Email: insurance@unifiedsymposium.org