



2019

**Comic-Con
International**
July 18-21
Preview Night
July 17

www.comic-con.org

**San Diego
Convention
Center**
111 W. Harbor Dr.
San Diego, CA
92101

**We must
receive
this form
by
JULY 1,
2019**

*Please return
this form to:*

**COMIC-CON
INTERNATIONAL**
P.O. Box 128458
San Diego, CA
92112

Phone:
619-414-1020

Fax:
619-414-1022

Email:
**exhibits@
comic-con.org**

Exhibitor Appointed Contractor Packet and Extended Move-In/Move-Out Request

DEADLINE: We must receive this form by JULY 1, 2019

Members of the Decorators Union claim jurisdiction over all set-up and dismantling of exhibits including signs and laying of carpet. You may install and/or dismantle your exhibit display if one person, who is a full time employee, can accomplish the task in one hour or less without the use of tools.

If your exhibit preparation, installation or dismantling requires more than 1 hour, you must use union personnel supplied by Freeman, the Official Decorating Contractor, or an Exhibitor Appointed Contractor.

If you plan to use an Exhibitor Appointed Contractor you must fill out this form and return it to Comic-Con no later than **July 1, 2019**.

Each contractor must provide a copy of their insurance certificate listing Comic-Con International and the San Diego Convention Center as being additionally insured. Please include this paragraph on each insurance certificate.

San Diego Comic Convention, and the Members, Officers, Directors, Agents, Volunteers and Employees of San Diego Comic Convention, are named as additional insureds and are provided the same coverage as the named insured, including the cost of defense, against claims for bodily injury, death, or property damage occurring in or upon, or resulting from the insureds participation during Comic-Con International. General Liability Waiver Applies.

Exhibitors must also fill out the Third Party Authorization form found at Freeman online. This link will be available shortly.

EXHIBITOR INFORMATION

Company Name: _____

Contact Name: _____

Booth Number: _____

Contact Phone Number: _____

EXTENDED MOVE-IN/ MOVE-OUT REQUEST

If your exhibit will require additional time to install or dismantle you may request early move-in and late move-out. **Not all exhibitors will qualify for extended move-in and move-out. Spaces are limited and we encourage you to make your request as early as possible.**

*Please note that there is **NO** Drayage Assistance Program during the extended move-in and move-out hours. All costs will be billed directly to the exhibitor.

Early Move-in Sunday, July 14

Early Move -in Monday, July 15

Late Move-out Monday, July 22



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(continued)

EXHIBITOR APPOINTED CONTRACTOR INFORMATION

Contractor Name: _____

Contractor Contact: _____

Phone Number: _____

E-mail: _____

Exhibitor Being Serviced: _____

Exhibitor Booth Number: _____

Type of Service Provided (i.e. labor, AV, design house, staffing, etc):

.....
Exhibitors must provide their contractor with any necessary information regarding the installation and servicing of the exhibit.

All EACs must be licensed and carry Union credentials.

All EAC's must check in and get appropriate Comic-Con credentials at the Exhibitor Registration desk located in the Sails Pavilion of the convention center. No one will be allowed inside the exhibit hall without proper Comic-Con credentials.

EXHIBITOR APPOINTED CONTRACTOR INSURANCE CARRIER INFORMATION

Insurance Carrier: _____

Insurance Carrier Contact: _____

Phone Number: _____

Email: _____

Address: _____

Insurance requirements can be found on the next page of the EAC Packet.

Insurance policies must list Comic-Con International and the San Diego Convention Center as being additionally insured. The specific text can be found on page 1 of the EAC Packet.



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(continued)

San Diego Comic Convention EVENT EXHIBITORS INSURANCE REQUIREMENTS

Prior to event, Exhibitors shall furnish Certificate of Insurance to San Diego Comic Convention, Inc. as evidence of the insurance coverage required herein.

Exhibitor(s) shall maintain the required insurance continuously during the term of the event. However, the Exhibitor(s) liabilities shall not be limited in any manner to the insurance coverage required. Insurance is to be placed with insurers having at least an A X policyholder's rating in accordance with the current A. M. Best Rating Guide, or equivalent insurer rating service.

Each insurance policy required herein shall be endorsed to state that coverage shall not be suspended, voided, cancelled, reduced in coverage or limits except after a thirty (30) day prior written notice, ten (10) days for non-payment of premium, has been submitted to San Diego Comic Convention, Inc.

The Certificate of Insurance shall be sent to:

Certificate Holder: San Diego Convention, Inc.
Attn: Justin Dutta
Address: 225 Broadway, Suite 1800
Email: San Diego, CA 92101

Minimum Limits of Liability – Unless otherwise agreed to in writing, Vendor's insurance shall be written with the following minimum limits of liability:

A. Commercial General Liability: The Exhibitor(s) shall procure and maintain a policy of Commercial General Liability insurance, provided on an occurrence basis and in limits not less than:

Each Occurrence Limit	\$1,000,000
General Aggregate	\$2,000,000
Products/Completed Operations Aggregate	\$2,000,000
Personal and Advertising Injury	\$1,000,000

Exhibitor(s) may utilize an Excess Liability policy to meet the required limits of insurance. Insurance deductibles greater than \$25,000 shall be declared on the certificate of insurance and shall be subject to approval by San Diego Comic Convention, Inc.

San Diego Comic Convention, and the Members, Officers, Directors, Agents, Volunteers and Employees of San Diego Comic Convention be named as an additional insured on the Insurance Certificate and an "additional insured" endorsement shall apply.

A waiver of subrogation in favor of Inspiration as named on the "Additional Insured" endorsement shall apply (see sample Endorsement).

Coverage afforded shall be primary and non-contributing with any other insurance maintained by.

B. Automobile Liability: (Combined Single Limit) **\$1,000,000**
Coverage shall provide for the loading and unloading of vehicles and liabilities arising out of the use of hired and/or non-owned vehicles.

C. Workers Compensation: The Exhibitor(s) shall procure and maintain Workers Compensation insurance as required by applicable state law for employees. Employers Liability insurance shall be provided in limits not less than:

Each Accident for Bodily Injury by Accident	\$1,000,000
Policy Limit for Bodily Injury by Disease	\$1,000,000
Each Employee for Bodily Injury by Disease	\$1,000,000