

EXHIBITORS AND CONTRACTOR'S HEALTH & SAFETY DECLARATION

Compulsory

Please fill in form, tick the boxes that apply, providing supporting information and submit by:

ASAP

(date)

If you have any queries please contact the Event Organiser

For Exhibitors:

Exhibiting/Contracting Company:

Name

Stand No:

Site Telephone No:

Email:

Declaration Authorised By (print & sign):

Position:

Individual with Overall Responsibility for Health & Safety on Site:

Name

Position:

Mobile No:

Email:

For Exhibitors:

We have a Table Top package stand.

We have trained and made our stand staff aware of the hazards to be expected on site. We have read and are committed to following the 'Health & Safety Rules' in the Exhibitor's Manual. We have completed a risk assessment and conclude that our exhibits, demonstrations and work practices will cause no significant risk to either others or ourselves on site. The risk assessment is available on request.

We have a Shell Scheme stand.

We have trained and made our stand staff aware of the hazards to be expected on site. We have read and are committed to following the 'Health and Safety Rules' in the Exhibitor's Manual. We have completed a risk assessment and conclude that our exhibits, demonstrations and work practices will cause no significant risk to either others or ourselves on site. The risk assessment is available on request.

We have a Shell Scheme stand with Product Demonstration / Activities.

We have trained and made our stand staff aware of the hazards to be expected on site. We have read and passed them the 'Health and Safety Rules' in the Exhibitor's Manual and are satisfied they are competent to undertake their tasks safely. We have ensured that a risk assessment is carried out for any proposed stand activities, product demonstrations and public demonstrations. Where the activity or product demonstration gives rise to significant risk full details have been submitted to the organiser with a copy of the risk assessments, method statement and stand plans / product specification.

We have a MEETING ROOM (venue or shell scheme).

We have trained and made our stand staff aware of the hazards to be expected on site. We have read and are committed to following the 'Health & Safety Rules' in the Exhibitor's Manual. We have completed a risk assessment and conclude that our exhibits, demonstrations and work practices will cause no significant risk to either others or ourselves on site. The risk assessment is available on request.

We have a SPACE ONLY (Free Build) stand and have not appointed contractors.

We have a risk assessment and method statement prepared for our exhibits, demonstrations and work practices and have brought the findings to the attention of our stand staff together with the 'Health and Safety Rules' in the Exhibitor's Manual, which we have read. Our risk assessment, method statement and stand plans have been forwarded to the Event Organiser at Informa.

We have a SPACE ONLY (Free Build) stand and have appointed contractors to design, build and/or dismantle our stands.

We have read and passed on the 'Health and Safety Rules' contained within the Exhibitor's Manual to our contractors and staff and are satisfied that they are competent to undertake their tasks safely. We have checked that our contractors have prepared a specific risk assessment, method statement and stand plans for the event and passed the relevant safety information on to their staff and sub-contractors. In turn we have completed our own risk assessment for our exhibits and demonstrations. All risk assessments, method statement and stand plans for our event have been forwarded to the Event Organiser at Informa.

We are a Co-exhibitor and are not involved with the construction or set-up of the stand.

We have completed a risk assessment and conclude that our exhibits and demonstrations will cause no significant risk to either others or ourselves on site. The risk assessment is available on request.

Our contractors will be using **access tower scaffolds** and I understand these will be subject to inspection by the Organiser.

PLEASE NOTE THAT EXHIBITOR/CONTRACTOR PASSES WILL NOT BE ISSUED IF THIS FORM IS NOT RETURNED

EXHIBITORS AND CONTRACTOR'S HEALTH & SAFETY DECLARATION

For Informa Contractors

- We have trained and made our staff and sub-contractors aware of the hazards to be expected on site. We have read and are committed to following the 'Health & Safety Rules' in the Exhibitor's Manual. We have completed a specific risk assessment and method statement for our work at this event, which also encompasses any work undertaken by sub-contractors, and provided these to the Event Organiser at Informa.
- Our contractors will be using **access tower scaffolds** and I understand these will be subject to inspection by the Organiser.

Main Contractor/Informa Contractor - SPACE ONLY EXHIBITORS

- Individual with Overall Responsibility for Health & Safety on Site:

Company:

Contact Name:

Position:

Mobile No:

Email:

Out of Hours Emergency Contact:

Name:

Position:

Mobile No:

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EXHIBITORS BUILDING HEIGHT DECLARATION FORM

Building Heights will be determined by the size of your stand:

Shell Scheme Stands:

All shell scheme stands will have 2.5m high walls provided: **maximum build height 3m**

Space Only Stands:

Floor space	Maximum Build height
6 - 17sqm	max 3m
18 - 35sqm	max 4m
36sqm - 80sqm	max 5m
81+ sqm + & Double Deckers	max 6m

*** please note that you must gain authorisation from your sales representative to build a double decker stand and that there may be an additional cost involved. You must have a space of 81sqm+ to build a double decker**

Please ensure the reverse side of stands are dressed, including exposed sides and back walls.

Please note, double decker stands will require a structural engineers certificate

This is a strict policy and any exhibitors who fail to comply with the above will be forced to amend their stand onsite.

Please sign and date this form to confirm you have read, understood, and accept Informa's terms and conditions , including the building height restrictions above

Full Name:

Signature:

Date:

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