

Please return form to:

**American Academy of Neurology**  
201 Chicago Avenue  
Minneapolis, MN 55415  
Industry Sales Team  
Email: corporatesales@aan.com

**DEADLINE DATE  
FEBRUARY 5, 2024**

**NOTIFICATION OF INTENT TO USE EAC**

NAME OF SHOW:

**2024 AAN Annual Meeting**

EXHIBITING COMPANY NAME:

BOOTH #:

PRINT NAME:

BOOTH SIZE:

SIGNATURE:

DATE:

*If your company plans to use a firm which is not the 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 of Contractor: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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 (MARCH 12, 2024).**