

EAC/WORK AUTHORIZATION

Exhibitors using an independent service company MUST complete this form and return it to SCTE along with a Certificate of Insurance by August 19, 2022. If you are using a third party contractor and your company does not provide the certificate, you will be prohibited from entering the exhibit hall.

INDEPENDENT SERVICE COMPANY #1:

Company: _____

Contact name: _____

Address: _____

Street/PO Box

City

State

Zip Code

Phone: _____

INDEPENDENT SERVICE COMPANY #2:

Company: _____

Contact name: _____

Address: _____

Street/PO Box

City

State

Zip Code

Phone: _____

Are these service companies authorized to order show services for your company? Yes No

Exhibiting Company: _____

Booth#: _____

Requested by: _____

Email: _____

Phone: _____

Date: _____

Please retain a copy of this form for your files.

THIS FORM MUST BE RECEIVED AT SCTE REGISTRATION BY AUGUST 19, 2022.

SCTE Registration | 140 Philips Rd., Exton, PA 19341-1318

Fax: 610.884.7126 | E-mail: expo@scte.org | expo.scte.org