



CANADA'S BIGGEST AUTO ENTHUSIAST & MOTORSPORTS SHOW

MARCH 8, 9 & 10, 2019

International Centre, Toronto, Ontario

Tel.416.962.7223 Fax.416.962.7208

www.MotoramaShow.com



MANDATORY OCCUPATIONAL HEALTH FORM

I, the undersigned, acknowledge that I have read and understood the health and safety acknowledgement. I agree to comply with and abide by all statutes and regulations that establish safety requirements, including but not restricted to the provision of the Ontario Occupational Health and Safety Act and Regulations thereunder, and will cooperate with Show Management in the establishment and enforcement of safe working procedures.

I also hereby confirm that, as an Exhibitor, I am considered "Prime Contractor" of my exhibit space and that I currently maintain and will maintain at the time of the show, adequate insurance to cover against any losses sustained or damages suffered, to personnel or to property arising out of any accidents or mishaps which may occur before, during or after the show attributable to exhibitor negligence in setting up or tearing down the exhibit.

Further, I agree to indemnify and save harmless CME Shows Inc., operating as Motorama Custom Car & Motorsports Expo from all claims, demands, actions, or causes of action and against any liability for damages, losses, expenses, fines and penalties of whatever kind or nature, arising out of any accidents or mishaps which may occur before, during or after the show which may be attributable to exhibitor negligence or breach of the Occupational Health and Safety Act and its Regulations in setting up or tearing down the exhibit, including limiting the generality of the foregoing, any fines or penalties assessed against the Indemnified under the Occupational Health and Safety Act.

In the event that the Indemnified Parties become involved in a charge, prosecution, civil litigation or any other legal proceeding under or related to the Occupational Health and Safety Act and its regulations arising out of or related to a breach of the contract or my performance or lack of performance of the contract or the violation of the Occupational Health and Safety Act and its Regulations, then, as an Exhibitor, I agree to be liable for, indemnify and pay the Indemnified parties' fine, penalty, judgment, debt, damages and reasonable legal fees.

I hereby declare that I have read, understood and agreed to be bound by the foregoing.

EXHIBITOR (Company Name): _____

SIGNED _____ NAME: _____

I have authority to bind the exhibitor

DATED THIS _____ DAY OF _____ IN THE YEAR _____.

Fax, mail or email completed form to: CME Shows Inc., PO Box 370; Bright's Grove, ON N0N 1C0

Fax (416) 962-7208 • Email: forms@MotoramaShow.com

Mail: PO Box 370; Bright's Grove, ON N0N 1C0

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