

2024 Governor's Safety and Health Conference and Exposition

Owensboro hosts the Governor's Safety and Health Conference and Exposition August 21-23, 2024, for the first time in the forty (40) year history of the event at the Owensboro Convention Center! The Exhibition is a one (1) day show, August 22, 2024, and wraps up with "An Evening with the Exhibitors"! The 2024 theme is "United for Safety and Health". This is a great opportunity to promote your company, products, and services to a wide variety of conference participants at the largest safety and health event in the Commonwealth. The schedule is constructed to allow conference attendees an extended dedicated opportunity to visit the Eexhibition Hall.

Exhibit Space Cost

•	8' x 10' in Exhibit Hall	\$325.00
•	8' x 20' in Exhibit Hall	\$695.00
•	Industrial Exhibitors in Exhibit Hall	\$995.00

Exhibit Space Includes

Added Value: skirted table, two (2) chairs, and wastebasket included.

- 8' x 10' or 8' x 20' booth with pipe and drape. 24-hour general security
- Lunch for two (2) booth workers
- Exhibit hall passes to share with clients (upon request)
- Electric is available for \$45/day per 120v / 20-amp hookup if ordered in advance. On-site orders are \$92.

Exhibit Dates & Hours

Registration and Set-up: Wednesday, August 21, 1:00 - 5:30 pm

Thursday, August 22, 8:00 am - 1:00 pm

Exhibitor Meeting: Thursday, August 22, 1:30 pm

Exhibition Hours: Thursday, August 22, 2:00 - 7:00 pm

Dedicated time with the Exhibitors: Thursday, August 22, 3:00 - 7:00 pm

Reception and Dinner with Exhibitors: Thursday, August 22, 4:00 - 7:00 pm

Load Out: Thursday, August 22, 7:00 am - 9:00 pm

Friday, August 23, 8:00 - 10:00 am

All Times are Central Daylight Saving

Governor's Safety and Health Conference and Exposition

Exhibitor Contract 2024

August 21-23, 2024

For Office Use Only:							
Booth # :	Date:						
Initials:	Paid:						

1. Exhibit Inform	nation				
Imp	ortant: PRINT yo	our company nam	ne <u>exactly</u> as you	want it to appear in all pro	omotional material.
Company Name:					
Name of person to	receive all informa	tion:			
Mailing Address					
City		State	Zip	County	
Telephone Numbe	r		Email		
Web address					
2. Exhibit Space	Preference and Ac	ccessory Requests			
				Select your top two (2) locat booths may be combined to fo	
	1st choice #		2nd choice	#	
	d 110v electrical ser ical service please a			70 - 8x10, \$740 – 8x20 or \$1	,040 – Industrial)
3. Payment Meth	od				
	k: Payable to "KSHN to: KSHN 2024 Exhib P.O. Box 4087 Frankfort, KY 406	vition			
OR					
2.) Request a Square	Invoice (Square invoi	ces allow fees to be p	aid via credit card a	nd provide an immediate paymer	t receipt)
Person requesting Sq	uare Invoice (print)				
Email					
4. Names of Boot	h Workers				
				0' booth are included; additi workers space below and inc	onal workers are \$75 per person. If you lude additional payment.
Included:	1. Name			Email	
	2. Name			Email	
Additional Worke	r(s): Name			Email	

Email____

5. Contract Authorization

By signing below, with or without appropriate payment, this contract shall become a legally binding contract. The individual signing this document represents that he/she is duly authorized to execute this binding contract on behalf of the exhibitor. By signing this agreement, Exhibitor agrees to abide by the following and be bound to this Contract, Governor's Safety and Health Conference and Exposition rules and regulations, Owensboro Convention Center management's rules and regulations, and the following Executed Release of Liability. Booth rental fee is due upon signing and submitting this exhibitor contract. *Review Exhibitor Executed Release of Liability before signing*

2024 Governor's Safety and Health Conference and Exposition Executed Release of Liability

Exhibitor shall be fully responsible to pay for any and all damages to property at the convention center, which results from any act or omission of exhibitor. Exhibitor agrees to defend, indemnify and hold harmless the Owensboro Convention Center and their officers, directors, partners, agents, members, managers and employees from and against any and all demands, claims damages to persons or property, losses and liabilities, including reasonable attorneys' fees (collectively "Claims arising out of or caused by the exhibitors or their members', agent's, employees', independent contractors' negligence in connection with the use of the convention center except to the extent and percentage attributable to the negligence of the convention center.

Exhibitor's liability shall include all losses, costs, damages, or expenses arising from or out of or by reason of any accident or bodily injury or other occurrences to any person or persons, including the exhibitor, its agents, employees, and business invitees which arise from or out of exhibitor's occupancy and/or use of the exhibition premises, the convention center, or any part thereof. The exhibitor understands that the convention center does not maintain insurance covering the exhibitor's property and that it is the sole responsibility of the exhibitor to obtain such insurance.

Authorized Representative Name (Please Print)	Date
Authorized Representative Signature	Date

6. Finalize Exhibitor Registration

Scan and submit completed Exhibitor Contract and Contract Authorization to exhibitor.kshn@gmail.com

Contact Randy Houston if you have questions or need additional information.

Randy Houston

Phone: (502) 299-6729