



2016 Health & Safety Acknowledgement Form

I, the undersigned, acknowledge that I understand the attached Health & Safety document. I agree to comply with and abide by all statutes and regulations that establish safety requirements, including, but not restricted to the *Ontario Occupational Health & Safety Act*, R.S.O. 1990, c.0.1 as amended. I also acknowledge that any employer (contractor) is required by Reg. 1101 to provide first aid provisions, and have a First Aid trained worker (to the standards required of the Regulation) in the immediate vicinity of the provisions. I will also cooperate with CNE Management in the enforcement of safe working conditions.

In the event of a charge, prosecution, or any other legal proceeding arising out of or related to the *Ontario Occupational Health & Safety Act*, R.S.O. 1990, c.01 as amended, as an exhibitor/concessionaire, I agree to be liable for the actions of my staff and contractors as it applies to the situation.

Company Name: _____

Booth or Location #: _____

Check ALL That Apply:

- | | |
|-------------------------------------------------------------|------------------------------------------|
| <input type="checkbox"/> QE Building/Arts, Crafts & Hobbies | <input type="checkbox"/> Enercare Centre |
| <input type="checkbox"/> Heritage Court | <input type="checkbox"/> Food Building |
| <input type="checkbox"/> Outdoor Concessionaire | <input type="checkbox"/> Outdoor Retail |
| <input type="checkbox"/> Other (please specify) _____ | |

Name (Please Print): _____

Signature: _____ Date: _____
(I have the authority to bind the company listed above)

MOVE IN WILL NOT BE PERMITTED UNTIL THIS FORM IS RECEIVED.

Please return signed and completed forms no later than July 15th, 2016.

• Fax: (416) 263-3863 • E-mail: exhibitorforms@theex.com