

# MATERIAL HANDLING AGREEMENT

INSTRUCTIONS: COMPLETE ALL SHADED AREAS. RETURN COMPLETED AGREEMENT TO SERVICE DESK WHEN MATERIALS ARE PACKED AND READY FOR SHIPMENT.

SHIPPER'S NUMBER

MHA #:

PLACE PRO NUMBER HERE

DATE

BOOTH NO.

DATE/TIME RECEIVED \_\_\_\_\_ AM  
\_\_\_\_\_ PM

<b>FROM:</b>	<b>TO:</b>
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Check option 1 or 2. Your driver must be checked in with us no later than:

<p>IN THE EVENT YOUR SELECTED CARRIER FAILS TO SHOW ON FINAL MOVE-OUT DAY, PLEASE SELECT ONE OF THE FOLLOWING OPTIONS:</p> <p>1. ___ RE-ROUTE VIA FREEMAN'S CHOICE</p> <p>2. ___ DELIVERY BACK TO WAREHOUSE AT EXHIBITOR'S EXPENSE</p> <p>_____</p> <p style="text-align:right">SIGNATURE</p>	<p><b>SPECIAL INSTRUCTIONS</b></p> <p>DECLARED VALUE: _____</p> <p>Confirm that the carrier is correct</p> <p>CARRIER _____ PHONE # _____</p>
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Indicate level of service being provide by your carrier or Freeman

BY \_\_\_\_\_  
\_\_\_\_\_ AM PM

CIRCLE NUMBER OF SEPARATE DESTINATIONS IN BOOTH: 1 2 3 4 OR MORE

<b>FREEMAN</b> Exhibit Transportation	<b>MUST WRITE THE WORD "AIRWAYS" HERE</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air Freight will be billed on Actual or Dimensional Weight if greater.							

OTHER CARRIERS	<b>AIRWAYS FREIGHT</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		COMMON CARRIER	VAN LINE	NEXT DAY	SECOND DAY	DEFERRED	

CHECKER	NO. PIECES	DESCRIPTION AND EXCEPTIONS, USED/REPAKED PARAPHERNALIA, EXHIBITION OR SHOW, NOI	WEIGHT (LB) SUBJECT TO CORR.	DATE/TIME CARRIER SIGNED
		Crates (wooden)		
		Cartons (cardboard)		
		Trunks / Cases (fiber) (color) _____		
		Skids / Pallets _____ Shrinkwrapped _____ Loose		
		Carpets (color) _____ Wrapped _____ Loose		
		Carpet Padding Rolls _____ Wrapped _____ Loose		

Confirm that the bill to address is correct

BY SIGNING THIS AGREEMENT, YOU ARE AGREEING TO BE BOUND BY FREEMAN'S TERMS AND CONDITIONS. THESE TERMS AND CONDITIONS ARE IN YOUR SHOW KIT OR CAN BE OBTAINED AT THE SERVICE DESK. BY SIGNING BELOW, EXHIBITOR SHALL BE CERTIFIED & WARRANTS THAT ITS FREIGHT CONTAINS NO HAZARDOUS MATERIALS.

IF NEITHER BOX IS CHECKED, SHIPMENT WILL BE SENT COLLECT. COLLECT  PREPAID

CHECKER NAME PRINT	DATE LOADED
TRAILER NO.	START TIME

**BILL FREIGHT CHARGES TO:**

EXHIBITOR SIGNATURE	PRINT NAME	DRIVER SIGNATURE	DRIVER PRINT NAME
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Sign and print your name. The emergency phone MUST be a number that you can be reached at such as a cell phone.

EMERGENCY PHONE:	DATE	PIECES RECEIVED
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