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| Résultat de recherche d'images pour "european society of cardiology" |  |
| **EXHIBITOR CERTIFICATE 2019** |
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| **EXHIBITOR NAME**: | | | | **CERTIFICATE MUST be returned to:**  **Alain FRANCIONI**  **A.F.S. Conseils & Sécurité**  76, rue Baudin - 93130 Noisy-le-Sec France  tel: +33 (0)6 70 61 95 11  Email: [**sps@afsconseils.fr**](mailto:sps@afsconseils.fr) |
| Hall / Pav.: | ROW: | BOOTH No.: | Surface: m² |
| Represented by: | | | |
| Tel: | | Email: | |

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| I the undersigned Ms/Mr ……………………………………………………………………………………………………………………………………….…………… representing the company ……………………………………………………………………………………………………………………….................... have read and understood the measures taken by the show's organiser for the **“ESC 2019”** show for the prevention of work-related accidents and health protection. |

**BELOW MUST BE COMPLETED**

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| **A – IF YOUR STAND IS**   * Supplied by the **ORGANISER** * Installed by you, **one single company** * Installed by a **decorator without subcontractors**.   **If YES** to one of the above conditions, please send the **Exhibitor Certificate** before 12/08/2019 to **A.F.S. Conseils & Sécurité** |

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| **B – IF YOUR STAND IS** | |  |  | |
| * Installed by **several independent companies** | | How many? |  |  |
| * Installed by a decorator using **at least two subcontractors** | | How many? |  |  |
| * Contains a **mezzanine or very large surface** | |  |  | |
| **If YES** to at least one of the above conditions, you must**, before 12/08/2019 :** | | | | |
| 1. Send a blueprint of your stand to **Alain FRANCIONI (SHP Coordinator for the show) - A.F.S. Conseils & Sécurité** | | | | |
| 1. **Mission a Safety and Health Protection Coordinator** for the booth's set-up and break down periods. French Law dated 31/12/93 N°93-1418 and French Decree dated 26/12/94 N°94-1159. This coordination mission cannot be undertaken by the exhibitor, the booth installer or the design office. It must be conducted by a certified professional who has official French certification. | | | | |
| 1. Send the contact details of the missioned SHP Coordinator and the General Coordination Plan for Safety and Health Protection (GCP-SHP) for this stand to **Alain FRANCIONI** - **Société A.F.S. Conseils & Sécurité -** | | | | |
| Coordinator Name: | Company Name: | | | |
| Address: | | | | |
| Tel: | Email: | | | |

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| **In conformity with current French legislation,** the Safety and Health Protection Coordinator mandated by the exhibitor must send the GCP-SHP for the booth to Alain FRANCIONI (SHP Coordinator for the show), at least 8 days before the start of event set-up and inform him of the **dates he will be on site**, with their client. |

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| **IN ANY AND ALL CASES, you can contact Alain FRANCIONI (SHP COORDINATOR for the show), if you have any questions or would like assistance concerning this procedure.** |

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| *Company Stamp (MANDATORY)* | *Date & Signature (MANDATORY)* |

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