

# Security Form



**PLEASE RETURN BY JUNE 1, 2015**

Company Name: \_\_\_\_\_

D/B/A/ Name: \_\_\_\_\_ Booth/Space No.: \_\_\_\_\_

E-mail: \_\_\_\_\_ Telephone: \_\_\_\_\_

Company Representative: \_\_\_\_\_ Title: \_\_\_\_\_

Company Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_ ZIP: \_\_\_\_\_

**Security Form is for Outdoor Exhibits ONLY. Indoor Exhibit Hangars are secured at night.**

**Security rate is \$30.00 per hour.**

Exhibitor will be invoiced for security orders after the event.  
(EAA will provide all security personnel with the appropriate credentials)

|                          |             |   |           |   |
|--------------------------|-------------|---|-----------|---|
| Monday, July 13, 2015    | Start _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. | End _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. |
| Tuesday, July 14, 2015   | Start _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. | End _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. |
| Wednesday, July 15, 2015 | Start _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. | End _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. |
| Thursday, July 16, 2015  | Start _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. | End _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. |
| Friday, July 17, 2015    | Start _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. | End _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. |
| Saturday, July 18, 2015  | Start _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. | End _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. |
| Sunday, July 19, 2015    | Start _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. | End _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. |
| Monday, July 20, 2015    | Start _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. | End _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. |
| Tuesday, July 21, 2015   | Start _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. | End _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. |
| Wednesday, July 22, 2015 | Start _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. | End _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. |
| Thursday, July 23, 2015  | Start _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. | End _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. |
| Friday, July 24, 2015    | Start _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. | End _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. |
| Saturday, July 25, 2015  | Start _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. | End _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. |
| Sunday, July 26, 2015    | Start _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. | End _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. |
| Monday, July 27, 2015    | Start _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. | End _____ | <input type="checkbox"/> a.m. / <input type="checkbox"/> p.m. |

Signature: \_\_\_\_\_ Date: \_\_\_\_\_