

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

FROM:

TO:

IN THE EVENT YOUR SELECTED CARRIER FAILS TO SHOW ON FINAL MOVE-OUT DAY, PLEASE SELECT ONE OF THE FOLLOWING OPTIONS:

1. ___ RE-ROUTE VIA FREEMAN'S CHOICE

2. **X** DELIVERY BACK TO WAREHOUSE AT EXHIBITOR'S EXPENSE

SIGNATURE

RE-ROUTE VIA **PUT ACTUAL CARRIER NAME** BY _____

DATE _____ TIME _____ AM PM

SPECIAL INSTRUCTIONS

DECLARED VALUE: \$ _____
(Optional)

CARRIER NAME WILL BE THE SAME FOR ALL BOXES WITH THIS SYMBOL.

CARRIER _____ PHONE # _____

PUT ACTUAL CARRIER NAME (YRC, UPS, ABF, ETC)

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

Desired Level of Service

Air Freight will be billed on Actual or Dimensional Weight, whichever is greater.

Ground Specialized Next Day Air 2nd Day Air 3-5 Day Service

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

DATE/TIME CARRIER SIGNED
Unless you have multiple destinations always select 1.

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, YOU ARE ACKNOWLEDGING THAT YOU HAVE READ, UNDERSTOOD, AND AGREE TO BE BOUND BY THESE TERMS AND CONDITIONS. EXHIBITOR SHALL BE RESPONSIBLE FOR ALL SHIPPING CHARGES INCURRED. EXHIBITOR'S SIGNATURE (OR THE SIGNATURE OF EXHIBITOR'S AGENT) CERTIFIES & WARRANTS THAT ITS FREIGHT CONTAINS NO HAZARDOUS MATERIALS.

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

BILL FREIGHT CHARGES TO:

GLOBALTRANZ
PO BOX 6348
SCOTTSDALE, AZ 85261

CHECKER NAME PRINT _____ DATE LOADED _____

TRAILER NO. _____ START TIME _____

FINISH TIME _____

EXHIBITOR _____

SIGNATURE _____ PRINT NAME _____

EMERGENCY PHONE: _____

BY SIGNING THIS, I AGREE TO ENTER AT MY OWN RISK AND HOLD FREEMAN HARMLESS FROM ALL LIABILITY ARISING FROM MY ACTIVITIES ON THE PREMISES.

CARRIER **PUT ACTUAL CARRIER NAME (YRC, UPS, ABF, ETC)**

DRIVER SIGNATURE _____ DRIVER PRINT NAME _____

DATE _____ PIECES RECEIVED _____