



WEFTEC Exhibitor Authorization Form

Marketing, Public Relations, and Advertising Representative Authorization Form

Still Camera, Cell Phone, Video Policy, and Streaming

Marketing, Public Relations, and Advertising Representatives (“Representative/s”) are only permitted to photograph and take video of the booth, staff, products, and other materials of the Exhibitor they represent. Live streaming is not allowed. Shots of other Exhibitor booths, staff, products, or materials are not allowed. One exception exists: permission is granted to take wide-angle shots of the exhibition floor.

Any Representative taking photographs or video of an Exhibitor booth, staff, products, or other materials without permission must relinquish the film or digital media immediately upon request. The film or digital media will be disposed of after being relinquished.

Representatives must complete and submit this form in advance of the conference for admittance onto the exhibitor floor. They are strongly encouraged to bring a hard copy of this form with them when checking in at registration. A WEFTEC staff member will escort each Representative to the appropriate exhibitor booth.

Representatives are solely responsible and liable for insuring adherence to this policy and agree to indemnify and hold WEF, its officers, directors, volunteers, employees, and agents harmless from any and all claims arising from failure to abide by this policy.

WEFTEC Exhibiting Company Name:		Booth Number:
Representative Name:		
Representative Title:		Date:
E-mail Address:		Phone:
Representative Signature: _____ On behalf of my company, I authorize the Publication/Media Representative listed below to photograph, shoot video, and/or record audio of my company’s exhibition booth, products, services, and representatives during regular exhibition hours at WEFTEC. The publication may use this footage to publicize my company and products in its print and online publications.		

Publication/Media Representative:		
Representative Name:		
Representative Title:		Date:
E-mail Address:		Phone:
Representative Signature: _____ IBy signing above, agree to abide by the WEFTEC Policy outlined above.		

WEF Authorized Signature:	Date:
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