



Indemnification and Hold Harmless Agreement

Contact Information

Name of Company: _____
 Scope of Work: Exhibiting at the 105th CACP Annual Conference
 Location: Shaw Conference Centre, Edmonton, Alberta
 Dates: August 23 – 24, 2010

_____ (*Company Name*) agrees to the fullest extent permitted by law, to protect, indemnify, defend and hold harmless the Shaw Conference Centre (Conference venue) in addition to Lange Transportation & Storage Inc., *Taylor & Associates*, Goodkey Show Services and any member of the Conference Organizing Committee for the Canadian Association of Chiefs of Police, their affiliates and associates against and from all claims, liability, damages, losses and expenses including attorney’s fees, howsoever the same may be caused by reason of any suit, claim demand, judgment or cause of action initiated by any person or entity arising or alleged to have arisen directly or indirectly out of the performance of _____ ‘s work.
 (*Company Name*).

The following insurance must be carried at the expense of the exhibiting company for the term of this agreement. Please attach copy of insurance coverage (as outlined below) and **return with a signed copy of this form** no later than **July 16, 2010** by fax to *Taylor & Associates* at 613-745-1846. We can be reached by phone at 613-747-0262 or 800-853-4494.

- Workers Compensation and Employer Liability Insurance covering all of its employees and representatives while they are performing work on the Shaw Conference Centre premises.
- Commercial General Liability Insurance, written on an “occurrence” basis and not on a “claims made” basis, including Contractual Liability and Automotive Liability Insurance with minimums of **\$2,000,000** for each occurrence (inside exhibitors only).

In addition, Shaw Conference Centre, Lange Transportation & Storage Inc., *Taylor & Associates*, Goodkey Show Services and any member of the Conference Organizing Committee for the Canadian Association of Chiefs of Police shall be named as additional insured.

Company Name: _____
 Authorizing Signing Officer’s Signature: _____
 Name (please print) _____
 Title: _____ Date: _____

Return this form no later than Friday, July 16, 2010 to:
CACP Annual Conference
c/o Taylor & Associates
 11 – 5370 Canotek Road, Gloucester, ON K1J 9E8
 Tel: 613-747-0262 | Toll Free: 800-853-4494 | Fax: 613-745-1846
 Email: cacp@taylorandassociates.ca