



## Health and Safety Declaration:

### British Association of Dermatologists 99<sup>th</sup> Annual Meeting – **Submission Deadline 10/05/19**

The Management of Health and Safety at Work Regulations requires co-operation and co-ordination with all parties whilst sharing a workplace. It is a condition of entry into the exhibition that EVERY exhibitor, contractor, sub-contractor, supplier and their agents comply with the Health and Safety at Work act 1974 (HASAWA74) and all other legislation covering the venue. The Exhibitor accepts that it is their legal and moral responsibility to ensure that their own and others health and safety is not put at risk by their actions (or inactions) during the British Association of Dermatologists 99<sup>th</sup> Annual Meeting. Please complete this form, ticking the relevant boxes to affirm your commitment to co-operation and co-ordination with the organisers and Venue.

#### **All Exhibitors:**

- We have undertaken a suitable and sufficient Risk Assessment for this show, which we will update as required and notify all relevant parties. This will include the intended use of sharps for testing or other purposes and/or any further potential hazards they may encounter whilst onsite.
- We agree to abide by the regulations set out in the exhibitor manual.
- We have taken out adequate public liability insurance to cover our activities on-site and hold a current certificate.
- Measures will also be put in place to ensure the stand complies with the Disability Discrimination Act and these will be fully documented in the open period Risk Assessment.
- We will adhere to HASAWA74 at all times on-site. Our staff will be sufficiently instructed and trained in the ACC Liverpool's Emergency Procedures and other matters relating to Health and Safety in order to carry out their tasks competently.

#### **Space Only Exhibitors Only**

- We will supply a Risk Assessment and Method Statement from our contractors/sub-contractors and are satisfied that they are experienced and competent enough to undertake the tasks we require of them.

Our appointed Health & Safety Representative for the stand is:

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

Stand Number: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Mobile: \_\_\_\_\_

Our 'out of hours' number is: \_\_\_\_\_

Please return to: [events@exhibitionservices.com](mailto:events@exhibitionservices.com)