

EXHIBITOR LIVE ABOARD



Company: _____

Contact Name _____

Phone: _____ E-mail: _____

This list will be held by the Security Desk and will be crossed check with the Live-Aboard passes Issued. Please complete all fields. Overnight access will not be given unless all information is provided.

INDIVIDUAL NAME	BOAT MODEL/NAME	DOCK	SLIP #

Employees must present ID and Exhibitor Badge to the Security Desk at the Main Entrance to access show grounds after show closing. All employees with Live-Aboard access must NOT roam the show floor after closing.

I certify that the individual(s) listed above are staying in the boat(s) listed. Failure to comply with the rules will result in forfeiture.