

# 2022 SYRACUSE AUTO EXPO

## ONCENTER LABOR REQUEST

Please submit completed form to:

Jim Garvey, Director of Operations

[J\\_garvey@asmsyracuse.com](mailto:J_garvey@asmsyracuse.com)

315-435-8017 Office, 315-341-8873 Cell Phone

DECORATOR: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

CONTACT PHONE NUMBER: \_\_\_\_\_

DATE LABOR IS NEEDED: \_\_\_\_\_

TIME OF LABOR REQUEST (START TIME): \_\_\_\_\_

NUMBER OF STAGEHANDS NEEDED: \_\_\_\_\_

APPROX. HOURS NEEDED: \_\_\_\_\_

(4 Hour Minimum per Stagehand)

POWER NEEDED:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NOTES:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_