

Southeastern Stamp Expo 2019 Official Exhibit Entry Form

Please reserve frames in Southeastern Stamp Expo, January 25- 27, 2019

Exhibitor's Name:

Mailing Address:

City, State, Zip Code:

Telephone Number(s):

E-Mail Address:

Exhibit Title:

Description:

Number of (sixteen 8 1/2x11 page) Frames: Number of Oversized Pages?

List your name in the program? Y N If no, please provide a pseudonym

Delivery of Exhibit (Select): In Person Agent (if applicable) By Mail

My Appointed Agent is:

Return Exhibit (Select): In Person Express Mail Priority Mail Registered Mail Insured Mail Other

Classification of the Exhibit per APS Judging Manual:

General Class Single Frame Class Youth Class

Birth Date (if under 22) **1st Time National Class Exhibitor?** Y N

I will attend the Expo Y N **I will stay at the Expo hotel (room rate \$99)** Y N

Member of a Southeast Federation Stamp Club? Y N

Other Society Memberships (Please List):

Entry Fees & Postage:

MAKE CHECKS PAYABLE TO

"Southeast Federation of Stamp Clubs"

Multiframe @ \$16 per frame: \$

Single Frame @ \$30 \$

Return Postage enclosed: \$

Tickets to Awards Banquet@\$55 ea. \$

Donation(s):

Recognized in the Show Program
and acknowledged with a tax letter

Beacon (\$100) \$

Hospitality (\$50) \$

Program (\$25) \$

Exhibition (\$25) \$

Total Enclosed \$

I agree that the decision of the judges shall be final, and hereby release and agree to hold harmless the judges, the SESE, the SEFSC and the American Philatelic Society, its officers, directors, employees and representatives from any damages, including but not limited to damages to my reputation or that of my exhibit, suffered or incurred as a result of the judging. I agree to abide by the SESE & APS rules and regulations.

Exhibitor's Signature: _____ Date:

(If submitted electronically, your signed check and payment indicates acceptance of the above conditions. You may also sign, scan and email.)

Use back of form to provide special mounting and/or return mailing instructions.

Mail this form, your check and SEVEN (7) copies of your title page/synopsis to:

SEFSC, P.O. Box 71657

Marietta, GA, 30007-1657

Attn: Exhibit Chair