



Bourse Application

November 5, 2022



Application is hereby made for ____ table(s) for the November 5, 2022, Coin, Currency & Collectibles Show to be held at the Embassy Suites by Hilton Columbia Greystone, 200 Stoneridge Dr, Columbia, SC 29210. Tables are on a first come first serve basis. A waiting list may be imposed. ALL DEALERS MUST BE MEMBERS OF MIDLANDS COIN CLUB. Membership is \$15 per year and maybe remitted with this application. Bourse fee includes four chairs, electrical outlets, and continuous security from 7:30 am to 5:00 pm.

- I'm enclosing:
- Membership payment \$15.00 (once per year).
 - Payment in full of \$ _____. (\$65 for each table),
 - A \$50 deposit due by October 1, 2022, with full payment due upon attending the show – Please reserve my table space. Balance due of \$ _____. Check No.: _____

Make checks payable and mail to: Midlands Coin Club
PO Box 8212
Columbia, SC 29202-8212

For more information contact **Andy Shaw, (803) 422-4821** or email: ams.325@hotmail.com

In making application I agree to the following:

1. All applicants must be 21 years of age or older.
2. Applicants offering any altered, counterfeit, or other spurious material are subject to expulsion from the show without recourse.
3. Applicants will be responsible for transactions that take place at their bourse space during the show and for collecting and remitting applicable taxes to the proper authorities.
4. The applicant will furnish showcases, table lights, extension cords, and display materials.
5. This contract, once signed by both parties, is NOT TRANSFERABLE. Penalty imposed is forfeiture of bourse space. NO REFUNDS will be given or cancellations accepted after 30 days prior to the date of the show.
6. This application releases the Midlands Coin Club (MCC), the Embassy Suites and all their officials, representatives and members from any liability subsequent to or during the show. The committee, officers or members of the MCC or the Embassy Suites will not be responsible for any loss, damage, theft or personal injury that may occur from any cause prior to, during, or subsequent to the period covered by the contract. The applicant expressly releases the aforementioned parties and agrees to indemnify same against any and all claims for such loss, theft, damage or injury.

SIGNATURE: _____ DATE: _____

NAME of COMPANY & OWNER: _____

STREET or PO BOX: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE DAY: (_____) _____ EVENING: (_____) _____

E-MAIL: _____ (Correspondence will be sent to this e-Mail address)

Midlands Coin Club Use Only:		
Date Received: _____	Pmt Method _____	By: _____
Date Received: _____	Pmt Method _____	By: _____