

## GENERAL INSTRUCTIONS

Payments to cover return shipment of exhibits should be by check or money order payable to SACAPEX.

Inquires, entry forms, payments and actual exhibits should be directed to:

SACAPEX Exhibit Chair  
Robert Pope  
9408 Appalachian Drive  
Sacramento, CA 95827  
916-583-3027  
thepope66@hotmail.com

## LOCATION OF SHOW

Scottish Rite Masonic Center  
6151 H Street (H at Carlson)  
Sacramento, CA

From Business 80 take J Street east to Carlson Drive.

From Highway 50 take Howe Avenue north to Fair Oaks Blvd. And turn left (west) onto Fair Oaks Blvd. to Carlson Drive.

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## OFFICIAL ENTRY FORM

Please reserve \_\_\_\_\_ frames for SACAPEX 2018 (**SACAPEX frames hold 16 pages**)

I am exhibiting as an (Adult) / (Junior)

Date of Birth (Juniors only) \_\_\_\_/\_\_\_\_/\_\_\_\_

I plan to (send) / (deliver) my exhibit.

Sacramento Philatelic Society member: Yes \_\_\_\_\_ No \_\_\_\_\_

American Philatelic Society member: Yes \_\_\_\_\_ No \_\_\_\_\_

First Time Exhibitor: Yes \_\_\_\_\_ No \_\_\_\_\_

Name in show program: Yes \_\_\_\_\_ No \_\_\_\_\_

Exhibit Title:

Exhibit Description:

Exhibitor Name:

Address:

City:

State:

Zip:

Telephone:

(       )

Email

**I understand this signed application to exhibit at SACAPEX 2018 implies complete understanding and agreement to be bound by the rules and regulations as printed in this prospectus.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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## LEAVE THIS SECTION BLANK. SHOW USE ONLY.

Date prospectus received:

Date acknowledged:

Date exhibit received:

Exhibit mounted by:

Exhibit dismounted by:

Exhibit picked up by:

Awards: