



Tri-State Model Railroad and Classic Car Show

Exhibitor Registration | 2017 Ashland, KY



Please print neatly

Company Name: <i>(If a business)</i>		
Contact Name:		
Address:		
City:	State:	Zip:
Telephone:	Cell:	
Email:		
Principal Product: <i>(Model Trains, Parts, Layout, Scenery, Promotion Etc.)</i>		

Exhibitor Type:

Seller: ___ Retailer ___ Artist ___ Non-Profit Group ___ Non-Profit Tourist Railroad
 ___ Railroadiana ___ Other: _____

Non-Sales: ___ Historical ___ Promotional ___ Non-Profit Group ___ Non-Profit Tourist Railroad
 ___ Other: _____

Tables: Tables are \$30 per 8 foot table. Exhibitors are not permitted to bring their own tables.

Number of tables requested: _____ x \$30 per table = \$_____

If you are bringing a layout, please use the attached layout diagram.

Deposit and Payment: There is a \$10 deposit per table due at the time of completing registration form. Balance will be due the day of the event.

Make Checks Payable to:

CPHRRHS
 PO Box 393
 Huntington, WV 25708

Mail to:

CPHRRHS Model Train Show
 PO Box 393
 Huntington, WV 25708

Check: ___	Visa: ___	Master Card: ___	Discover: ___	American Express: ___
Credit Card:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Exp Date:	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>	Security Code: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Number of Tables: _____ x \$10 Deposit per Table = \$_____				
Total: \$_____ - Deposit: \$_____ = Due day of event: \$_____				

For Office Use ONLY!				
Paid Deposit: \$_____ on _____ Check #: _____ CC: _____				

