

# ALLENTOWN PAPER SHOW, LLC.

SEAN KLUTINOTY, Show Manager, P.O. BOX 156, CENTER VALLEY, PA. 18034

Telephone (610) 573-4969

Dear Dealer,

Thank you for being interested in the **Allentown Paper Show**. Please mail the enclosed application to me as soon as possible so I will know to include you in future shows. Please feel free to call me at any time.

## ALLENTOWN PAPER SHOW:

**Please indicate the shows you are interested in participating in:**  
**April (3<sup>rd</sup> or 4<sup>th</sup> weekend) 2 Day show** \_\_\_\_\_  
**October (1<sup>st</sup> weekend) 2 Day Show** \_\_\_\_\_

Set up for each show is the Friday before the show from 8:30 to 7:00.  
Saturday morning 7:30 until 9:00.

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### BOOTH RESERVATIONS SUBJECT TO APPROVAL AND AVAILABILITY

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone (        ) \_\_\_\_\_ Pa. Sales Tax No. \_\_\_\_\_  
E-MAIL \_\_\_\_\_

Prefer booth:    \_\_\_ 13 x 10.5 = 3 8ft tables \$290.00  
                  \_\_\_ 16 x 10.5 = 4 8ft tables \$310.00

**(Tables are included and each booth has a 6ft table in the front and a pegboard behind it.)**

**Extra Pegboards \$10.00** \_\_\_\_\_

**Please list the name of any person in your household who will be doing the show with you.** \_\_\_\_\_

**If the show is full at the time of the application I will notify you and then mail you a contract as soon as a booth becomes available.**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**My deposit of \$50.00** \_\_\_\_\_ **is enclosed. Rent must be paid in full one month prior to the show**

**(Make checks payable to ALLENTOWN PAPER SHOW, LLC. )**

**Mail to: SEAN KLUTINOTY, P.O. BOX 156 CENTER VALLEY, PA. 18034**