MAX 2027 TABLE RESERVATION FORM

YORK EXPO CENTER, YORK, PA, USA
SEPTEMBER 16- 19, 2027

FOR OFFICE USE ONLY
CSH CHK CC _____
AMT _____
TIME _____
INIT _____

OHIO VALLEY MILITARY SOCIETY, INC., P.O. Box 98, Batavia, OH 45103-0098, USA
VOICE: 513-245-9540 • FAX: 513-245-9541 • E-MAIL: ovms@fuse.net • WEB: www.sosovms.com

PLEASE READ AND FILL OUT THIS FORM COMPLETELY

PLEASE PRINT CLEARLY

OVMS Member #: _____

Last Name _____ First Name _____

Phone _____ Company Name _____

Address _____ City _____

State _____ Zip _____ Country (If other than USA) _____

E-mail Address _____

Main Area of Merchandise _____

Received $ _____ For _____ Table(s). Location Preference* _____

All remaining balances are due by August 1st, 2027 !!!!!!!

ELECTRIC ___I will need electricity for my table location. **$175** per location.

TABLE RATES: $105 per aisle table, $125 per wall table.

Table applications must be recieved by **MAY 15, 2027** to request same location.

By accepting table space, I agree to the following: Supervise my table(s) and follow the rules of The Ohio Valley Military Society, Inc., and York Expo Center (to be mailed with table confirmation), follow all Federal, State, and Local laws, rules, and regulations pertaining to firearms, and to be setup and doing business until 4 pm Saturday. I understand that if I violate any rules, my privilege to display will be terminated. While my display is on the premises of the Show Hall, I accept risk of any loss, damage or accident, and hereby release The Ohio Valley Military Society, Inc., The York Expo Center, their officers, directors, and employees from all liability. The Ohio Valley Military Society, Inc. assumes no responsibility for any condition that prevents a table holder from attending the show. If you will be arriving late, call the office. Table(s) not occupied by 11 am Friday, revert back to the Society. Cancellations, notify the OVMS by email or (number above) no later than **August 15, 2027**, to receive a refund. Cancellations received after this date, or no-shows, will not be refunded. Roll Overs are at the discretion of the club and only good for 1 year. The OVMS reserves the right to cancel tables at any time.

This form must be signed and dated before tables will be assigned.

Signature _____ Date _____

***LOCATION PREFERENCE**

We will try to accommodate all requests for location of table(s) in the show hall. Preference will be given to table holders having the same location from the previous year. First time table assignment does not guarantee that location. Requests for same location but different quantity of tables, will result in location change. Tables are NOT transferable. **TABLE LOCATION WILL BE PRINTED ON YOUR DEALER PACKET**

PROGRAM LISTING

All Table Holders will be listed in the program. If you DO NOT wish to be included, please check the LINE below.

___DO NOT INCLUDE MY INFORMATION IN THE PROGRAM.

PAYMENT METHOD:

CHECK OR MONEY ORDER PAYABLE TO: **O.V.M.S.**

FAMILY PASS 1._____
2._____
3._____

HELPER BADGES

ALL HELPERS OVER 18-YEARS OLD MUST BE AN OVMS MEMBER. One (1) free helper badge for one table; two (2) free badges for two or more tables. Spouse and/or child (under 18-years old) of the dealer / helper do not count toward the total and are no charged **but still need a badge**. Additional helper badges (Max. total of 4 additional badges) can be ordered for **$80** each. List name(s) and member number of your helper(s) below. Badges are nontransferable. **Helper badges made at the show will cost $50 each in addition to any other charges. Life Members do not require a helper badge**

1. _____ Mbr# _____
2. _____ Mbr# _____
3. _____ Mbr# _____
4. _____ Mbr# _____
5. _____ Mbr# _____
6. _____ Mbr# _____

MC VISA | CREDIT CARD NUMBER | EXP. DATE (MONTH YEAR) | SEC. CODE

Credit Card Signature _____

Office Use Only: CSH CHK CC _____ Grand Total: $ _____

200914

Top (original): Submit with payment. Yellow (copy): Keep for your records.