THE SUNSHINE POST CARD CLUB

WINTER SHOW February 27-28, 2027
Saturday 10am – 5pm, Sunday 9am – 4pm

DEALER CONTRACT

Hampton Inn & Suites Tampa – Northwest Oldsmar, 4017 Tampa Rd., Oldsmar, FL 34677. Park behind the building for direct loading access into the show room. I understand and agree to the following:

- Dealers must be paid current club members to set up at the show (you may send your dues along with the contract here).
- Dealers will be allowed to enter the Hall to set up at 7:30 a.m. on Saturday and Sunday.
- Name badges and table covers will be provided. Dealers agree to stay open during all advertised show hours – no early packing up or breakdowns.
- All items offered for sale must be clearly priced.
- Dealers are responsible for collecting all required taxes and remitting them to the proper authority.
- Dealers are responsible for any and all lighting and back-up tables/shelving they provide.
- Back-up tables are just that, for back-up stock only and should not be used as sales tables.
- No advertising signs on your table can be larger than 8.5" x 11".
- Dealers agree to abide by Club rules and hereby release the Sunshine Post Card Club, its officers and members from all liability for loss or damage to property and/or personal injury during set-up and all hours the show is open and/or dealers are on the premises.

Questions? Contact Kevin Hughes 848-448-8655 postcardguy@aol.com or
Bonnie Wilpon, 813-599-0488, bonnpon@att.net

Please sign, complete and return with full payment by February 1st, 2027. Any late signups will incur an additional $10 fee. Please make checks payable to Sunshine Post Card Club and mail to Kevin Hughes, 1755 Country Meadows Dr, Sarasota FL 34235

I agree to abide by the rules and regulations listed above.

_____ _____

Signature Date

6' tables are $80 each, 2 for $150, 3 for $220, 4 tables $275. Number needed _____ $ _____

Backup tables are $10 each (limited supply avail.). Number needed _____ $ _____

Club Dues (if membership has expired) $10 Individual or $15 for a Family $ _____

Total: $ _____

PRINTED NAME _____ EXTRA BADGE FOR _____

ADDRESS _____

PHONE (Cell) _____ EMAIL (print) _____