

MARYLAND STATE NUMISMATIC ASSOCIATION, INC.

March 26-29, 2015

Baltimore Convention Center
One West Pratt St.
Baltimore, Maryland

Date:

EXHIBITOR: _____ (please print)

NAME:

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ADDRESS:

CITY:

STATE:

ZIP:

TELEPHONE: _____ (residence) _____ (business)

CLUB

AFFILIATION(S):

MY EXHIBIT WILL BE CLASSIFIED AS: **JUNIOR**
_____ (UNDER 18)

SENIOR _____

MY EXHIBIT WILL BE: **COMPETITIVE** **NON-COMPETITIVE**

TYPE OF NUMISMATIC MATERIAL TO BE EXHIBITED:

U.S. COINS _____ FOREIGN COINS

_____ U.S. PAPER MONEY _____ FOREIGN PAPER MONEY
_____ MEDALS _____ ANCIENT

COINS _____ TOKENS

GOLD _____ OTHER (Please specify)

TITLE _____ OF _____ EXHIBIT:

NUMBER OF CASES (Maximum of 6): _____ I WILL NEED
CASES

_____ I HAVE MY OWN CASES

CASES TO BE FLAT ON TABLE: **HORIZONTAL** _____ **VERTICAL**

OTHER SPECIAL REQUIREMENTS:

MAIL SIGNED APPLICATION AND AGREEMENT TO:

**Bryce Doxzon
1712 Langford Road
Baltimore, MD 21207**

EXHIBITOR

SIGNATURE _____