

**SACAPEX 2021 GENERAL INSTRUCTIONS**

Payments to cover return shipment of exhibits should be by check or money order payable to SACAPEX.

Inquires, entry forms, payments and actual exhibits should be directed to:

SACAPEX Exhibit Chair  
Robert N. Pope  
850 Wixford Way  
Sacramento, CA 95864  
916-583-3027  
thepope66@hotmail.com

**LOCATION OF SHOW**

Scottish Rite Masonic Center  
6151 H Street (H at Carlson)  
Sacramento, CA

From Business 80 take J Street east to Carlson Drive.

From Highway 50 take Howe Avenue north to Fair Oaks Blvd. And turn left (west) onto Fair Oaks Blvd. to Carlson Drive.

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**OFFICIAL ENTRY FORM**

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Please reserve \_\_\_\_\_ frames for SACAPEX 2019 (**SACAPEX frames hold 16 pages**)

I am exhibiting as an (Adult) / (Junior)

Date of Birth (Juniors only) \_\_\_/\_\_\_/\_\_\_

I plan to (send) / (deliver) my exhibit.

Sacramento Philatelic Society member:    Yes \_\_\_\_\_    No \_\_\_\_\_

American Philatelic Society member:    Yes \_\_\_\_\_    No \_\_\_\_\_

First Time Exhibitor:    Yes \_\_\_\_\_    No \_\_\_\_\_

Name in show program:    Yes \_\_\_\_\_    No \_\_\_\_\_

Exhibit Title: \_\_\_\_\_

Exhibit Description: \_\_\_\_\_

Exhibitor Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone:    (       ) \_\_\_\_\_

Email \_\_\_\_\_

**I understand this signed application to exhibit at SACAPEX 2021 implies complete understanding and agreement to be bound by the rules and regulations as printed in this prospectus.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**LEAVE THIS SECTION BLANK. SHOW USE ONLY.**

Date prospectus received: \_\_\_\_\_ Date acknowledged: \_\_\_\_\_

Date exhibit received: \_\_\_\_\_ Exhibit mounted by: \_\_\_\_\_

Exhibit dismounted by: \_\_\_\_\_ Exhibit picked up by: \_\_\_\_\_

Awards: \_\_\_\_\_