



**2017 COA Key West Convention
Bourse Agreement Form
Bourse dates, August 18-19, 2017**

I, _____ have read and understand all the COA Bourse Rules and Guidelines as written on the reverse side of this sheet and hereby agree to abide by them. Appropriate names and figures supplied on this form and proper payment is included with my COA Convention Registration Form and this Bourse Agreement. If paid by Pay Pal full payment or receipt indicating this payment was made through our PayPal account (billing@conchologistsofamerica.org) must be included as a dealer for the 2017 Bourse.

Note: COA membership for the year 2017 must be received no later that December 31, 2016 in order to be a member in good standing for the year 2017 before applying for Bourse space. You must register and pay for the full convention.

Business Name _____

Owner's Name _____

Mailing Address (include City, State, Zip, and _____

Address (continued) _____ **E-Mail** _____

Number of tables requested (includes covers and skirted) @ \$80.00 each # _____ x \$80 = _____
Dealers are individually responsible for providing extension cords, power strips, lighting, etc

If extra tables are available are you interested in additional tables? Y ___ N ___ How many? _____
(Do not fill in cost of additional tables unless notified you will receive extra tables.) = _____

Do you plan to share a table with another dealer? Y ___ N ___
If yes, the dealers name is _____

Dealers may have only **two (2)** registered assistants for this convention.

If the assistant is registered for the full convention there is no charge. Registration # _____

1st Assistant name for Badge (Print legibly please) _____

2nd Assistant name for Badge (Print legibly please) _____

If the assistant is not registered for the full convention \$40 is the daily registration fee.

1st Assistant name for Badge (Print legibly please) _____ = _____

2nd Assistant name for Badge (Print legibly please) _____ = _____

Total Payment: Carry this Bourse Total to the Dealers Bourse section on your Registration form.
Bourse Total = _____

**Make and keep a copy of this form and submit one copy along with your Convention Registration Form and send your payment to the Convention Registrar: Karlynn Morgan
3098 Shannon Dr.
Winston Salem, NC 27106**