***Exhibit Submission Entry Form***

**SVQP 2024 National “Up to Two Page” Exhibition**

Saturday & Sunday October 26-27, 2024

Salon du vieux papier de Québec, Hotel Travelodge Conference Center

Québec City

**One form per exhibit.** Photocopy this form to submit multiple entries. Please refer to the separate Prospectus “Rules and Regulations”. Entry form(s) must be received no later than **August 31, 2024** by SVPQ 2024 Exhibits Committee with Entry fees.

Exhibit Class: 🞏 A: Competitive (evaluation by judges and public) 🞏 B: Non-competitive (only by public)

Subclass: 🞏 1: Adult 🞏 2: Youth

Category: 🞏 Philately 🞏 Illustrated Postcards

Format: 🞏 Single page (8.5”x11”) 🞏 Two pages (8½” x 11”) or one 11 x 17 page

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

Brief Description / Synopsis (maximum 25 words) included in Show Program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- |
| **ENTRY FEES** | **Quantity** | **Sub-total $** |
| Adult: $10 each |  |  |
| Youth: free |  | 0 |
| Return delivery + $5 Handling |  |  |
| Donation / PayPal premium |  |  |
| **Total remitted** |  |  |

Payment: E-transfer to salonduvieuxpapierdequebec@videotron.ca

Cheque to the order of **SVPQ Inc.** c/o **SVPQ 2024 Exhibits Committee P.O. Box 88250 Quebec City, QC G3J 1Y9**

**Return Shipping** instructions (If applicable; see requirements below) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Delivery of Exhibit:** 🞏 Personally 🞏 By my agent \_\_\_\_\_\_\_\_\_\_\_\_\_\_ 🞏 Mail, or 🞏 Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Pick up of Exhibit:** 🞏 Personally 🞏 By my agent \_\_\_\_\_\_\_\_\_\_\_\_\_\_Shipping: If exhibit is to be returned by mail/courier it must be insured, traceable and signed for on receipt. (Self-addressed adhesive labels would be appreciated). Please indicate service: 🞏 Xpresspost 🞏 Registered 🞏 Courier (name & account # )\_\_\_\_\_\_\_\_\_\_\_ Insured Value $C\_\_\_\_\_\_\_\_\_

I understand that I am responsible for insuring my exhibit and I will not hold SVPQ 2024, any Societies involved, Travelodge Hotel, nor any of the volunteers, members, committees, officers, or employees of above organizations liable for any loss or damage to this exhibit. I agree to the terms of the prospectus, and confirm that this exhibit is my sole property. I have read and agree to abide by the SVPQ 2024 Prospectus “Rules and Regulations”.

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

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Nom de plume (if so desired): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Any questions**: salonduvieuxpapierdequebec@videotron.ca or gteyssier@videotron.ca

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