



REGISTRATION FORM
OTTAWA ORCHID SOCIETY
37th ANNUAL SHOW AND SALE

April 20 to 22, 2018
RA Centre, 2451 Riverside Drive
Ottawa, Ontario

EXHIBIT ENTRY & VENDOR'S REGISTRATION FORM

EXHIBITOR'S /
VENDOR'S NAME: _____

Postal Address: _____

Telephone No. _____

E-mail address: _____

Please describe below the amount of space required for your exhibit, whether it is to be on a table, on the floor, against a wall or all round, and if you require access to hydro or any other requirements.

VENDOR'S REGISTRATION INFORMATION

COMMERCIAL NAME: _____

Number of sale tables required _____ @ C\$200 each.
Please submit payment and registration form before March 23rd, 2018.

Please make cheques payable to **Ottawa Orchid Society**. Send your payment and registration form by 23 March 2018 to:

Dave Cooper, 1145 Wolf Grove Road, Almonte, Ontario, K0A 1A0

For more information, contact Dave by e-mail at orchidae@storm.ca

or by phone at 613-256-2853.