

45th ANNUAL TWIN-CITY GUN SHOW
LEWISTON ARMORY, 65 CENTRAL AVENUE, LEWISTON, MAINE 04240
MARCH 24, 25 & 26, 2023

PLEASE READ THE FOLLOWING CAREFULLY AND FILL IN APPROPRIATE BLANKS:

1. I will be in attendance () Friday () Saturday () Sunday
2. I will have the following for display or sale: (Check all that apply)
 - () Antique Firearms
 - () Edged Weapons
 - () Reproduction Firearms
 - () Antique or Modern Gun Parts
 - () Cartridges for Collectors
(Gun Powder Prohibited)
 - () Military Accouterments
 - () Shooters Supplies
 - () Nazi Items
 - () Jewelry
 - () Clothing
 - () Other (Describe) _____
3. I understand that if my table is not occupied by 9:00 am Saturday, or if I depart the show prior to closing, the table reverts to the Auburn Exchange Club without refund.
4. I agree not to wear concealed or otherwise, any handguns on show premises.
5. I have read and understand the regulations above and will comply. I understand that I must be responsible for all tables and displays accepted in my name.
6. I understand that no refunds will be made after March 10, 2023.
7. No "Subletting" permitted.
8. All local, state and federal firearms laws must be obeyed.
9. **ALL GUNS MUST BE TIED DURING THE SHOW.**

NAME _____ COMPANY NAME _____

ADDRESS _____ CITY/TOWN _____ STATE _____ ZIP _____

EMAIL ADDRESS _____

BUSINESS PHONE _____ FAX _____ CELL _____

I desire ____ eight foot table(s). 1-3 tables, \$55.00 each, 4+ tables, \$50.00 each (Remittance Must Accompany the Application) and exhibitor's badges are desired for:

_____ & _____.

(PRINT OR TYPE NAME AS IT SHOULD APPEAR ON BADGE)

Please note, two exhibitors badges are allotted for the first table and one additional badge for each additional table.

MAKE CHECKS PAYABLE TO: AUBURN EXCHANGE CLUB - GUN SHOW

To apply for tables, complete the above form and return to:

Auburn Exchange Club
Attn: John Higgins
P.O. Box 1061
Auburn, ME 04211-1061

Additional information, please call 207 777-3579 or 207 754-1934 or email twincitygunshow@gmail.com

APPLICATION MUST BE RETURNED BY FEBRUARY 28, 2023 AND WILL BE PROCESSED IN THE ORDER THEY ARE RECEIVED

(Please do not write below this line)

Date received: _____ Amount of Check: _____
Tables Last Show: _____ Tables This Show: _____