

**BALPEX 2025**  
**APPLICATION FOR BOURSE SPACE---DEPOSIT DUE JUNE 27th (extended)**

Mail to: Barry W. Casanova, Esq., Bourse Chairman **Deadline for Application Return as above**  
Baltimore Philatelic Society, Inc. **Full Payment DUE NLT: July 21<sup>st</sup>, 2025**  
3440 Ellicott Center Dr. (20% penalty for late payments)  
Suite 103 *Booth Assignments first come first served!*  
Ellicott City, MD 21043 New floor plan, Table Assignments open **BUT LIMITED**

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**PLEASE PRINT CLEARLY OR TYPE THE FOLLOWING INFORMATION**

FIRM NAME \_\_\_\_\_

NAME OF PRINCIPAL (if different) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE (daytime) \_\_\_\_\_ (evening) \_\_\_\_\_

FAX \_\_\_\_\_ E-mail \_\_\_\_\_

I HEREBY APPLY FOR A BOOTH AT BALPEX 2025. I have received, read, and understand the BALPEX '25 REGULATIONS and agree to abide by them. [Note Regulation #13.] By signing and submitting this Application, the applicant acknowledges that if accepted, it will create a legally binding contract under Maryland Law between the Applicant and BPS/BALPEX for the bourse space under the Regulations, terms and conditions as set forth herein and in the aforementioned Regulations.

I CERTIFY THAT I have not been expelled from or denied membership in any philatelic organization or ephemera organization. (NOTE: If this is not the case, strike out the previous sentence and attach an explanation.) I am a member of the following organizations:

ASDA# \_\_\_\_\_ APS# \_\_\_\_\_ OTHER \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

BOOTH ASSIGNMENT \_\_\_\_\_ BOOTH FEE \_\_\_\_\_

Booth 2<sup>nd</sup> choice if above not available \_\_\_\_\_ Fee \_\_\_\_\_

☐ Check here to rent a new locking cabinet. (rear table to be adjusted). Enclose \$125.00 cabinet rental fee.

[For Dealers flying in, if 36" x 30" clear plastic table cover(s) for your sales table is/are needed, please contact the Bourse Chairman well in advance so they can be procured. (Available for \$25/sheet rental).]

**IF DOUBLE BOOTH OR MODIFICATION IS REQUIRED – NEGOTIABLE. PLEASE CONTACT ME!!!**

ENCLOSED is \$ \_\_\_\_\_ for Booth Fee/Deposit (Minimum \$500.00 deposit (Ext'd) due June 27<sup>th</sup>); and, if applicable, CABINET RENTAL, PATRON LISTING, &/or BALPEX PROGRAM AD. **Final Balance Due July 21<sup>st</sup>.**

**YOU MAY RECEIVE CONFIRMATION, but NOT ANY ADDITIONAL DEADLINE NOTICE.**

Mail check payable to "Baltimore Philatelic Society, Inc. and this entire application and attachments to:

Barry W. Casanova, Esq., Bourse Chairman  
Baltimore Philatelic Society, Inc.  
3440 Ellicott Center Dr., Suite 103  
Ellicott City, MD 21043

(OVER)

DEALERS' BADGES WILL BE READY WHEN YOU ARRIVE. **Please print name(s) legibly:**

1. \_\_\_\_\_ Chief Pt of Contact
2. \_\_\_\_\_
3. \_\_\_\_\_

In the BALPEX Program we will include a description of each dealer's specialty. Please provide a brief description of your specialty as you would like it to appear in the BALPEX '25 program.

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If your firm would like to purchase either a Patron Listing or an Ad in the BALPEX Program, see schedules and instructions attached.

**\*\*\*HOTEL ACCOMMODATIONS:\*\*\***

This year we are again at the BWI Airport Marriott Hotel--a substantial improvement from our prior venue. Your table/booth fee **includes** a three (3) night stay, September 4<sup>th</sup>, 5<sup>th</sup> and 6<sup>th</sup>, at a standard room with either a king or two double beds. This room **MUST** be reserved through the BALPEX Committee under a specific guest, not corporate, name, and **NOT** through the hotel reservation website. **CUT-OFF August 6<sup>th</sup>, 2025.**

Additional accommodations or extra nights must be booked through the BALPEX Website or Marriott (1-800-228-9290 or 410-859-8300) to get the BALPEX rate (\$147/night plus 14% state & local taxes). **HOTEL CUT-OFF August 7<sup>th</sup>**. At check-in you must give your BALPEX submitted registration name to check against the list we have furnished to the hotel. The hotel requires a credit card on file for additional services charged to your room.

Name under which BALPEX should book the room: \_\_\_\_\_

Type of Room      \_\_\_\_\_ One King Bed      \_\_\_\_\_ Two Double beds

Handicapped or other Special Needs: \_\_\_\_\_

If a BONVOY member, your Card Number: \_\_\_\_\_

QUESTIONS: Contact Barry Casanova, Esq., Bourse Chairman: [bwcasanova@msn.com](mailto:bwcasanova@msn.com)

Office Phone: 410-442-2040      Cell: 443-904-1929

THANKS FOR YOUR COOPERATION!

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