

THE MISSOURI VALLEY ARMS COLLECTORS ASSOCIATION, INC. PRESENTS:
THE RETURN OF OUR ANNUAL K.C. NATIONAL WINTER ARMS SHOW

JANUARY 9th & 10th, 2027 (Saturday & Sunday)

RESERVATION REQUEST FORM (PLEASE PRINT OR TYPE)

_____ - 8-foot x 2.5-foot **Display** table(s) for 2 days @ **\$35.00** per table
_____ - 8-foot x 2.5-foot **Sale** table(s) for 2 days @ **\$135.00** per table
_____ - **Electrical connection** for display lighting **\$125.00**
_____ - **Electric Scooter Rental** *Please include weight requirements **\$200.00**

NOTE: Table holders can unload, set up and trade on Friday, January 8th from 8:00am to 7:00pm.

There will be NO unloading or any other show activity (including Security on site) Thursday, January 7th!

Special Request _____

The following information must be provided to the MVACA Show Director in order to receive the best possible consideration to your exhibit and its requirements; please check each applicable category and describe how you expect to display it, especially if you have an upright over 3 foot high above table or unfinished back display.

Type of Table: Displayer _____ Trader/Seller _____ Commercial Dealer _____
Display Material: Guns _____ Cartridges _____ Edged Weapons _____ Militaria _____ Other _____
Describe display or merchandise _____

My check for \$ _____ covering the table reservation(s) requested above is enclosed.
(Make all checks payable to MVACA.) I understand my reservation is non-transferable without prior approval of the MVACA Show Director. I also accept that there will be no adverse weather refunds or carryovers, the show will take place regardless of weather conditions. I further certify that I have read and will abide by the MVACA Show Rules. I also accept that MVACA is not legally responsible for thefts or accidents and agree to indemnify MVACA, the Show Director, the KCI Expo Center Owners and the City of Kansas City, Missouri in all liability arising out of my actions or participation in this show.

Payment MUST accompany this reservation form _____

Legal Signature

Name _____

Address _____

City, State, Zip _____

Phone _____ E-mail Address _____

Mail to: ***MVACA National Show Director***
P. O. Box 1315
Kearney, MO 64060
(816) 744-0209
showdirector@mvaca.org

Total No. of ID Badges Needed: _____
Maximum at no cost: 2 for first table and 1 for each additional table purchased. Additional badges \$35 ea.

Host Hotel: Holiday Inn KC KCI
Phone: 816-801-8400

FFL Dealers only: please check here (_____) if you are willing to make firearms transfers during this MVACA gun show to individuals from your home state of: _____.