



BOOTH SPACE

\$650 US per Booth• 8'-10' x 10' booth space.

- 8' backwall drapes and 3' sidewall drapes provided.
- One electrical outlet up to 500 watts capacity provided.

BULK SPACE

\$1.60 US per sq. ft.

 No space dividers/drapes furnished with bulk space.

OUTDOOR SPACE

\$.90 US per sq. ft.

- No space dividers/drapes furnished with bulk space.
- Power is NOT included with outdoor space.
- Must purchase indoor space to qualify for outdoor areas, as space allows.

EXHIBIT HOURS

Thurs., Sept. 17 11 AM to 8 PM Fri., Sept. 18 11 AM to 8 PM Sat., Sept. 19 10 AM to 8 PM

Floor plan and exhibit hours subject to any necessary change without notice. Floor plan by O'Loughlin Trade Shows. Copyright 2020.

Sun., Sept. 20 10 AM to 6 PM

PLAN AHEAD FOR THESE OTHER GREAT RV SHOWS

TACOMA FALL
RVSHOW

OCTOBER 8-11, 2020

tacomafallrvshow.com

TACOMA RVSHOW.

JANUARY 21 - 24, 2021

tacomarvshow.com

O'LOUGHLIN TRADE SHOWS



Phone: 503-246-8291 800-343-6973



24-Hour Fax: 503-246-1066



Mail: P.O. Box 80750 Portland, OR 97280-1750



E-Mail & Website: peter@otshows.com aj@otshows.com pdxrvshow.com

BOOTH REQUEST FORM

Apply online now at PDXRVSHOW.COM

Exhibit Space Type

We need:	sq. ft. of Bulk Space							
and/or	8'-10' x 10' Booth(s)							
Description of products / services: (Please be as descriptive as possible)								

Exhibitor Website Upgrade

□ Bold Listing - \$50

Business name & booth number are BOLD and in a different color

□ Enhanced Listing - \$125

Business name, booth number, logo, website link, up to 200 characters for profile.

□ Premium Listing - \$250

Business name, booth number, logo, website link, up to 400 characters for profile, embedded video.

| Company Info

	_		erent from company name in the contact name in the mailing add				
Paym	ent In	fo • F	Fall RV & Van	Show			
☐ I have	enclosed	a check	with this application	Check #	Amount Enclo	sed:\$_	
Please ch	arge my:						
NUCA		AMERICANI	Card #		Exp	/	CCV
VISA	MasterCard	AMERICAN EXPRESS	Name on card:		Signature:		
			Payments made with a c	redit card will have a	4% processing fee added t	o the tota	al cost of the spac
Billin	g Info	rmat	ion 🗆 (Check here i	f your billing informa	tion is the same as the co	ompany i	info below)
Name:			Ac	ldress:			

City: _____ State/Province: ____ Zip/Postal Code: ____

Telephone: (____) ____ - ____ Cell: (___) ___ - ____ Fax: (___) ___ - ____

Email: _____ Website: ____

Copy this form and fax/mail today PO BOX 80750 • Portland, OR 97280-1750

P (503) 246-8291 • F (503) 246-1066 E peter@otshows.com or aj@otshows.com

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