

## **EXHIBITOR APPLICATION**

# JANUARY 28 - FEBRUARY 1, 2026 | PALM BEACH COUNTY CONVENTION CENTER

### APPLICATION SUBMISSION DEADLINE: OCTOBER 1, 2025

Gallery Na	ame:				
Gallery Di	rector/Own	er Name:			
Alternate	Contact:				
Mailing Ad	ddress:				
City:			State:	Zip Code:	
Telephon	e:	Mc	obile:	Fax:	
Email:			Billing Email:		
Web Add	ress:				
PLEASE	CHECK DE	SIRED BOOTH SIZE			
	12' x 16'	(3.66m x 4.88m)	192 sqft x \$72 per sqft	\$13,824.00	
	12' x 20'	(3.66M x 6.1m)	240 sqft x \$72 per sqft	\$17,280.00	
	12' x 30'	(3.66m x 9.14m)	360 sqft x \$72 per sqft	\$25,920.00	
	12' x 40'	(3.66m x 12.19m)	480 sqft x \$72 per sqft	\$34,560.00	
	24' x 20'	(7.32m x 6.1m)	480 sqft x \$72 per sqft	\$34,560.00	
	24' x 30'	(7.3m x 9.1m)	720 sqft x \$72 per sqft	\$51,840.00	
	24' x 40'	(7.32m x 12.19m)	960 sqft x \$72 per sqft	\$69,120.00	

**Included in the booth cost:** 12' high perimeter white painted hard walls, polished concrete floors, 1 four foot table and two chairs, booth signage, drayage, basic interior booth lighting and one full page ad in the digital show catalog. There are additional fees for additional lighting and walls, custom paint, Wi-Fi, special construction, rigging, electrical services, shelving, and sculpture pedestals.

<sup>\*\*</sup> Booth sharing is not permitted.



### **SHOW DETAILS**

January 29, 2026 11am - 6pm January 30, 2026 11am - 6pm January 31, 2026 11am - 6pm February 1, 2026 11am - 6pm  Sculpture Photography
äir:
ry proposes to exhibit, along with a document email ( <b>info@artpalmbeachshow.com</b> ) or web
years.
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Please Note: This application is the first step in the contracting process: Approved exhibitors will be contracted under separate cover. No contract will be sent until exhibitor is approved by the selection committee of the Art Palm Beach Show.



# APPLICATION FEE\* "There is a 2.5% fee for all credit card transactions There is a non-refundable \$125 (US) application fee for all applying exhibitors. Please provide the following information: Billing Name: Billing Address: City: State: Zip Code:

Credit Card #:\_\_\_\_\_ CRV:\_\_\_\_\_

Credit Card Type: \_\_\_\_\_ Credit Card Expiration Date: \_\_\_\_\_