TEXAS STATE BUTTON SOCIETY (TSBS)
TRAY CHECK-IN/OUT INVENTORY

Name _____
Email _____ or Phone #_____
List the trays you have entered for TSBS Show 20__ __
ENTRANT NO._____ (will be assigned at tray check-in)

Award #	Division	Section Class	Size	Description

Tray check in by _____ Tray check out by _____

Received by _____

Optional: Indicate **"yes" or "√" if you grant** TSBS permission to use photographs of your button tray for the following: (leave **blank for "no")**
TSBS newsletter _____; TSBS website _____; Newspapers _____.
May we include: *Your name ____; Name of your local club_____; Town of residence _____?*

Signature: _____ Date: _____