

Pennsylvania Dental Association presents

PENNSYLVANIA'S DENTAL MEETING

April 21-22, 2017 • The Hotel Hershey



DEAR PROSPECTIVE EXHIBITOR,

Pennsylvania's Dental Meeting, in its third year, welcomed 140 dentists in 2015 and 278 dentists in 2016. We expect the attendance to continue to climb for 2017. This year's meeting offers attendees a choice from 24 hours of continuing education offered by leading researchers and educators. Topics include:

- Posterior composites
- Esthetics
- Substance abuse epidemic
- Radiology
- Economic trends for dentists to monitor
- Oral cancer screening and management
- New nasal anesthesia - Kovanzaze®



EXHIBIT DATES & HOURS

Friday, April 21

9:30 a.m. – 5:00 p.m.

Set up begins at 6:00 a.m. on April 21.

Saturday, April 22

8:00 a.m. – 3:00 p.m.

Please be advised that early breakdown on Saturday afternoon is prohibited.



Pennsylvania Dental Association P.O. Box 3341 | Harrisburg, PA | 17105 | Phone: (717) 234-5941 | Fax: (717) 232-7169

EXHIBIT INFORMATION

EXHIBIT SPACE & COST

The cost for an exhibit space is **\$1,500** and includes a six-foot skirted table, two chairs, electricity and meals (continental breakfast and lunch) for two representatives per exhibiting company. The floor plan will be shared with the exhibitors in March as part of the meeting packet and assignments will be made at that time.

Exhibit tables are limited so complete your application and return it today!

EXHIBITOR REGISTRATION

Meeting packets will be emailed in March for companies to register personnel attending the meeting and order services such as internet. Please note that one 110 volt outlet (up to 10 amps or 1000 watts) is included with the exhibit table. Each exhibit is limited to individuals, business firms, manufacturers and dealers who have contracted and paid for space. Exhibit personnel must be bona fide employees of the sponsoring company or representatives who receive commission, brokerage or salary from the sponsor.

HOTEL RESERVATIONS

The room rate is \$239 single/double plus 11% tax. Go to www.padental.org/PDM and click the Hotel Reservations button to reserve your room online. Or call the Hotel Hershey at (717) 533-2171 or (800) 533-3131 and tell the reservationist that you are with PA Dental Association.

DEADLINE MARCH 10, 2017

REFUNDS

All cancellations must be in writing. Cancellations received on or before **March 20, 2017**, will be assessed a \$100 administrative fee. No refunds will be issued after **March 20, 2017**.



SPONSORSHIP LEVELS



Become a meeting sponsor and increase your visibility to PDA member dentists. You may wish to show your support for the Pennsylvania Dental Association by becoming a sponsor instead of exhibiting at the meeting.

| | |
|-----------------------|------------------------|
| Platinum Level | \$10,000 and Up |
| Gold Level | \$ 6,000 |
| Silver Level | \$ 3,000 |
| Bronze Level | \$ 1,500 |

Contributors are welcome at *any* amount under \$1,499 and will be recognized in the program and on PDA's website.

| | Platinum | Gold | Silver | Bronze |
|--|----------|-------------------------------|--------|--------|
| Exhibit Space | ✓ | Available for purchase | | |
| Recognition in sponsor listing in the program | ✓ | ✓ | ✓ | ✓ |
| Recognition in sponsor listing on PDA website | ✓ | ✓ | ✓ | ✓ |
| Attendee roster (without email addresses) | ✓ | ✓ | ✓ | ✓ |
| Recognition in the July/August 2017 issue of the <i>Pennsylvania Dental Journal</i> | ✓ | ✓ | ✓ | ✓ |
| Place one item in the attendee tote bags | | ✓ | ✓ | ✓ |
| Place two items in the attendee tote bags | ✓ | | | |
| Recognition on event signage | ✓ | ✓ | ✓ | |
| Verbal recognition during the meeting | ✓ | ✓ | | |
| Company logo and hyperlink on PDA website | ✓ | ✓ | | |
| Full-page, full-color advertisement in the program <i>(preferred placement for Platinum Sponsors)</i> | ✓ | ✓ | | |
| Half-page, full-color advertisement in the program | | | ✓ | |
| Recognition in the pre-event mailer | ✓ | | | |
| Recognition in the November/December 2016 issue of the <i>Pennsylvania Dental Journal</i> | ✓ | | | |
| E-newsletter advertisement | ✓ | | | |
| Two tickets to the welcome reception on Thursday, April 20 | ✓ | | | |



ADDITIONAL SPONSORSHIP OPPORTUNITIES

Night at the Museum: The Hershey Story

\$3,500

- The closing dinner will be celebrated at The Hershey Story and attendees can explore the exhibits and create their own truffle at the chocolate lab demo. Sponsors receive Silver level benefits in addition to verbal recognition, event signage and 4 tickets to the event.

Co-Sponsor a CE Speaker

\$3,500

- Assist with travel and honorarium expenses for main stage speakers Gerard Chiche, DDS or Robert Stutman and Judge Jodi Switalski. Co-sponsors receive Silver level benefits in addition to verbal recognition and signage at the sponsored session.

Lanyards for Meeting Attendees

\$1,700

- Your company name on the lanyards and Bronze level sponsor benefits.

Meeting Tote Bags

\$1,500

- The tote bags will include your company name and logo. A great way to increase your visibility with the attendees after the meeting concludes. The tote bag sponsor also receives Bronze level benefits.



RULES AND REGULATIONS

Space: The exhibitor agrees that the exhibit will be confined to the area of the space contracted and that subletting or showing products other than those manufactured or represented by the exhibitor is strictly prohibited. The exhibitor also agrees not to display noisy electronic devices, sound equipment or other devices that interfere with other exhibits. The playing of live or recorded music in an exhibit space is prohibited.

Care of Space: The exhibitor agrees not to deface, injure or mar any surface of The Hotel Hershey or any of the furniture or fixtures contained therein and/or any of the property placed therein by the Pennsylvania Dental Association (PDA). The exhibitor shall be liable to PDA and or The Hotel Hershey for any damage to the Hotel or any of the furniture or fixtures contained therein or any of the property placed therein by PDA which shall occur by reason of the commissions or omissions of any exhibitor and/or its agents or employees. All materials used in an exhibit must conform to the requirements of the fire department. X-Ray equipment is to be dead.

Liability, Security & Insurance: All exhibits and respective contents are displayed at the exhibitor's risk. The exhibit area is in a public space of The Hotel Hershey and will not be secure when the exhibit hours conclude. PDA assumes no responsibility for the safety of the personnel and property of the exhibitor or the personal property of their officers, agents or employees. The exhibitor assumes entire responsibility and hereby agrees to protect, indemnify, defend and save harmless PDA, The Hotel Hershey, its owner and operator and their affiliated and subsidiary companies and their respective partners, directors, officers and employees and agents (the "indemnities") against all claims, losses or damages to persons or property, governmental charges or fines and attorney's fees arising out or caused by the exhibition's installation, removal, maintenance or occupancy or use of the exhibition premises or part thereof, excluding only any liability caused by the sole negligence of the indemnities.

In addition, the exhibitor acknowledges that PDA, The Hotel Hershey and any of the other indemnities do not maintain insurance covering the exhibitor's property and that it is the sole responsibility of the exhibitor to maintain insurance.

Payment: Contracts received on or after **March 20, 2017**, must be accompanied by payment in full. If any remaining balance of the full remittance of the contract has not been received by PDA by **April 3, 2017**, PDA reserves the right to cancel this contract without liability. In such an event, PDA shall retain the amount paid by the exhibitor as a forfeited deposit. Any exhibitor with a remaining balance on **Friday, April 21, 2017**, will not be allowed to set up until full payment as been remitted in the form of cash, certified check or money order.

Conduct and Restrictions: PDA reserves the right to restrict and/or terminate all exhibits which, because of sound, odor, food, drink or other objectionable features, interfere with the orderly procedure of the meeting. PDA also reserves the right to prohibit any display or procedure which in its judgment runs counter to the general character of the meeting. Therapeutic products or products of a therapeutic nature that do not meet the ethical standards of the dental profession will not be accepted for display.

Exhibitors may not host a function in conjunction with Pennsylvania's Dental Meeting without the written consent of PDA.

The exhibitor shall, during the meeting, use for exhibit, display or related purposes, only the space which has been contracted. No exhibitor will conduct a seminar or presentation in the Harrisburg/Hershey area from **April 20-22, 2017**.

Improper conduct (as that term is construed by the PDA and/or The Hotel Hershey, to include but not be limited to the representation of a product or service without the purchase of exhibit space, or the presence of any person associated with a commercial endeavor within the exhibit area who is not affiliated with a paid-in-full exhibitor) will not be permitted and can result in the termination of the exhibitor's ability to display at the meeting. In the event termination does occur the exhibitor shall not be entitled to any refund of amounts paid to PDA.

Companies sponsoring prize drawings in conjunction with the meeting must prominently display any limitations on registering for or accepting the prize.

The rights and obligations set forth herein apply as well to the conduct of agents and employees of the exhibitor and any property used by such companies in the installation and operation of exhibits.

The decision of PDA as to what acts constitute a breach of the above conditions shall be final and any exhibitor shall be subject to eviction without refund if it is judged to be in violation of the aforementioned conditions.

Interpretations of Above Rules and Regulations:

Above stated conditions are considered a part of this contract. PDA reserves the right to interpret them as well as make decisions on all points the rules and regulations do not cover. Decisions of the Pennsylvania Dental Association are final.

PENNSYLVANIA'S DENTAL MEETING

SPONSOR APPLICATION/CONTRACT

Please complete all sections of this contract and print as clearly as possible so we can translate the information accurately. In submitting this application, you agree that you have read, understand and will abide by all of the rules and regulations outlined in the prospectus.

PLEASE SELECT FROM THE FOLLOWING LIST TO SUPPORT PENNSYLVANIA'S DENTAL MEETING 2017:

- | | |
|---|--|
| <input type="checkbox"/> EXHIBIT SPACE (\$1,500 PER TABLE) | <input type="checkbox"/> NIGHT AT THE MUSEUM: THE HERSHEY STORY (\$3,500) |
| <input type="checkbox"/> PLATINUM LEVEL \$10,000 AND UP (INCLUDES EXHIBIT SPACE) | <input type="checkbox"/> CO-SPONSOR A CE SPEAKER (\$3,500) |
| <input type="checkbox"/> GOLD LEVEL \$ 6,000 | <input type="checkbox"/> LANYARDS FOR MEETING ATTENDEES (\$1,700) |
| <input type="checkbox"/> SILVER LEVEL \$ 3,000 | <input type="checkbox"/> MEETING TOTE BAGS (\$1,500) |
| <input type="checkbox"/> BRONZE LEVEL \$ 1,500 | <input type="checkbox"/> PROGRAM ADS |
| <input type="checkbox"/> CONTRIBUTORS ANY AMOUNT SPONSORSHIP AMOUNT \$ _____ | In the on-site program book distributed to all attendees <input type="checkbox"/> \$500 Full Page <input type="checkbox"/> \$250 Half Page *Artwork must be received by February 24, 2017. |

PLEASE PRINT

Company Name and Mailing Address _____

Describe Company Products/Services _____

Contact Person & Title _____

Email Address _____ Phone Number _____

Authorized Signature (*individual who has authority to enter into contracts on behalf of the company*) _____

Exhibitor Kit Should Be Sent To:

Full Name _____ Email Address _____

Subtotal \$ _____ Discount \$ _____ Subtract discount of \$150 if application and deposit are received by February 24, 2017.

Total Due \$ _____ Today's Deposit (50% of Total Due): \$ _____

PAYMENT - must be made in U.S. funds drawn on a U.S. bank

- Check made payable to PDA is enclosed.
- Charge the credit card provided. Mastercard VISA American Express Discover
- Card Number _____ Expiration Date _____

Print the Name as it appears on the card _____

Credit Card Billing Address _____

Email the receipt to _____

If you are paying the deposit with a credit card, please indicate if you would like PDA to automatically charge the remaining balance.

- Please charge the remaining balance on March 20, 2017.
- We will send a check to pay the balance (*must be received no later than March 20, 2017*).

Please complete and return to Rebecca Von Nieda no later than **March 10, 2017**:
PDA, PO Box 3341, Harrisburg, PA 17105
or fax (717) 232-7169 or rvn@padental.org