

Pennsylvania's Dental Meeting

April 17-18, 2026 • Omni Bedford Springs Resort and Spa
2198 Sweet Root Rd, Bedford, PA 15522



Exhibit on:

FRIDAY, APRIL 17

8:30 A.M. - 3:30 P.M.

SATURDAY, APRIL 18

8:30 A.M. - 3:30 P.M.

{Setup begins at 7 a.m. on April 17}

Registration deadline:

MARCH 20, 2026

The Pennsylvania Dental Association will hold its annual meeting at the historic AAA Four Diamond Omni Bedford Springs Resort and Spa, conveniently located four miles from the PA Turnpike.

Meeting Agenda

FRIDAY, APRIL 17, 2026

- 7:45 a.m. – 8:45 a.m. **Keynote Address – Leadership in Life and Service.** *Presented by Major General Sean T. Collins, Air National Guard*
- 9:00 a.m. – Noon **CE – 3 credits; Restoring Dental Implants—A Practical Approach to Clinical Success** *Presented by Mark E. Hyman, DDS*
- 12:15 p.m. – 2:45 p.m. **Luncheon and Address – Looking Ahead to the 'Next Era' of Oral Health: Opportunities and Challenges**
- 3:00 p.m. – 5:00 p.m. **CE – 2 credits; Act 124 – Evidence-based Analgesia for Post-Surgical Dental Pain**
- 6:00 p.m. – 7:00 p.m. **Welcome Reception** (exhibitors invited)

SATURDAY, APRIL 18, 2026

- 8:00 a.m. – 10:00 a.m. **CE – 2 credits; Act 31 – Child Abuse Recognition and Reporting for Dental Professionals**
- 9:00 a.m. – 11:30 a.m. **Breakfast and PDA's Business Meeting**
- 10:45 a.m. – 12:15 p.m. **CE – 1.5 credits; Emergency Preparedness in the Dental Office**
- Noon – 1:15 p.m. **Luncheon**
- 12:45 p.m. – 2:30 p.m. **CE – 1 credit; Student and Resident Poster Contest**
- 1:15 p.m. – 4:15 p.m. **CE – 3 credits; Restoring Teeth with High Strength Injectable Composite** *Presented by Robert D. Marus, DDS, AAACD, FICD*

Exhibit Information & Sponsorship Opportunities*

Exhibit Space & Cost

The cost for an exhibit space is \$900 and includes a six-foot skirted table, two chairs, electricity, two tickets to the Friday Welcome Reception plus breakfast and lunch each day for two representatives per exhibiting company. The floor plan will be shared with the exhibitors in April as part of the meeting packet and assignments will be made at that time.

Exhibitor Registration

Meeting packets will be emailed in April 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

Reserve your room before **March 17, 2026**. A block of rooms has been reserved at the rate of \$249 single/double plus 8% applicable taxes per night. The resort fee of \$39 per night has been waived for our meeting.

Call (877) 409-6664 and refer to Pennsylvania's Dental Meeting to receive the discounted room rate.

Sponsorship Opportunities*

Reception - \$2,000

Sponsor the Welcome Reception from 6:00 p.m. to 7:00 p.m. on April 17. *Sponsors receive four additional tickets* to the event in addition to verbal recognition and signage at the event.

Co-sponsor a CE Speaker - \$1,500

Co-sponsors receive verbal recognition, signage at the sponsored course and have the opportunity to introduce the speaker at the event.

Coffee Break - \$1,500

Treat attendees to a cup of coffee with your company logo on the paper cup and signage on the break table.

Lanyards for Meeting Attendees - In-Kind Sponsorship

Donate 500 clip-on lanyards and PDA will distribute those to the attendees.

Meeting Tote Bags - In-Kind Sponsorship

Donate 150 tote bags and PDA will distribute those to the attendees. Minimum size excluding handles is 12" H x 9" W x 2" D.

**Sponsorships are in addition to the fee for exhibit space at the meeting.*

Exhibit applications

Due by: March 20



Refunds:

All cancellations must be in writing.

Cancellations received on or before April 1, 2026, will be assessed a \$100 administrative fee.

No refunds will be issued after April 2, 2026.

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.

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

The annual report is distributed at the meeting and published online for all member dentists.





DIAMOND \$10,000	RUBY \$5,000	EMERALD \$3,000	SAPPHIRE \$1,500
			

Exhibit Space	✓	AVAILABLE FOR PURCHASE		
Recognition in sponsor listing in the annual report	✓	✓	✓	✓
Recognition in sponsor listing on the PDA website	✓	✓	✓	✓
Attendee roster	✓	✓	✓	✓
Recognition in the July/August 2026 issue of the <i>Pennsylvania Dental Journal</i>	✓	✓	✓	✓
Place one item in the attendee tote bags	✓	✓	✓	✓
Recognition on event signage	✓	✓	✓	
Verbal recognition during the meeting	✓	✓		
Company logo and hyperlink on the PDA website	✓	✓		
E-newsletter advertisement	✓			
Tickets to the Friday Welcome Reception	✓ 6 tickets	✓ 4 tickets	✓ 2 tickets	

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 Omni Bedford Springs 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 Omni Bedford Springs 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 Omni Bedford Springs 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, Omni Bedford Springs, 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, Omni Bedford Springs 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 31, 2026, 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 1, 2026, 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 17, 2026, 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. No exhibitor will conduct a seminar or presentation in the area of Bedford, Blair, Somerset, Huntingdon and Fulton counties from April 16-18, 2026.

The exhibitor shall, during the meeting, use for exhibit, display or related purposes, only the space which has been contracted. The exhibitor agrees that PDA, its officers, trustees, agents, employees and contractors shall not be held responsible for the effectiveness of product awareness in the exhibit area or expectations of attendance numbers at the meeting.

Improper conduct (as that term is construed by the PDA and/or Omni Bedford Springs, 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.

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 2026:

- | | | | |
|---|-------------------|---|----------|
| <input type="checkbox"/> Exhibit space | (\$900 per table) | <input type="checkbox"/> Co-sponsor a CE Speaker | \$1,500 |
| <input type="checkbox"/>  DIAMOND | \$10,000 & up | <input type="checkbox"/> Welcome Reception on 4/17 | \$2,000 |
| <input type="checkbox"/>  RUBY | \$5,000 | <input type="checkbox"/> Coffee Break | \$1,500 |
| <input type="checkbox"/>  EMERALD | \$3,000 | <input type="checkbox"/> Lanyards for meeting attendees | Donation |
| <input type="checkbox"/>  SAPPHIRE | \$1,500 | <input type="checkbox"/> Meeting Tote Bags | Donation |
| <input type="checkbox"/> Contributors any amount | \$ _____ | | |

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 \$ _____

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 31, 2026.

☐ We will send a check to pay the balance (must be received no later than March 31, 2026).

Please complete and return to Rebecca Von Nieda by March 20, 2026:

PDA, PO Box 3341, Harrisburg, PA 17105
 or fax (717) 232-7169 or rvn@padental.org