

**Mid-Peninsula Dental Society**  
**220 Main Street Suite 208A**  
**Phone 650-328-2242 Fax 650-331-0541**  
**2018 Continuing Education Meeting Schedule**  
**EXHIBITOR / SPONSOR CONTRACT**

COMPANY NAME \_\_\_\_\_  
 YOUR NAME \_\_\_\_\_ EMAIL \_\_\_\_\_  
 COMPANY ADDRESS \_\_\_\_\_  
 CITY, STATE, ZIP CODE \_\_\_\_\_  
 TELEPHONE: \_\_\_\_\_ EMAIL LOCAL REP: \_\_\_\_\_ FAX \_\_\_\_\_  
 NAME(S) OF REPRESENTATIVE(S) ATTENDING MEETING \_\_\_\_\_  
 PRODUCT AND/OR SERVICES EXHIBITNG \_\_\_\_\_

<p><b>Sponsors:</b>  <b>All Exhibitors Benefits</b>  <b>Company name on all event mailings</b>  <b>Opportunity to speak for 5 minutes at meeting</b>  <b>Plus special recognition as a SPONSOR</b>  <b>Meal for two representatives</b></p>	<p><b>Exhibitors:</b>  <b>One Table Exhibitor Space</b>  <b>Verbal Recognition from Podium</b>  <b>Meal for one representative</b>  <b>Listing on a poster at the meeting</b></p>
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**WE WOULD LIKE TO BE AN EXHIBITOR OR SPONSOR AT THE FOLLOWING MPDS MEETINGS:**  
*Please check appropriate programs & indicate whether you wish to be an Exhibitor or a Sponsor*

<p>  <b>Friday, March 16th</b>          "Complete Dentistry Meets Occlusion"          Speaker: Timothy Leary, DDS</p>	<p><b>7:30-1:00 PM</b>          Crowne Plaza          4290 El Camino Real, Palo Alto</p>	<p><b>Exhibitor</b>            <b>\$350</b></p>	<p><b>Sponsor</b>            <b>\$750</b></p>
<p><i>*Please let me know if it is acceptable to donate \$25 from your payment towards a gift card for our raffle for this meeting.</i></p>			
<p>  <b>Thursday, April 19th</b>          "Associateship Can Be Your Secret to Success that Helps you Succeed"          Speaker: William van Dyk</p>	<p><b>5:30-8:30 PM</b>          Crowne Plaza          4290 El Camino Real, Palo Alto</p>	<p><b>Exhibitor</b>            <b>\$350</b></p>	<p><b>Sponsor</b>            <b>\$600</b></p>
<p><i>*Please let me know if it is acceptable to donate \$25 from your payment towards a gift card for our raffle for this meeting.</i></p>			
<p>  <b>Thursday, September 20th</b>          "Pearls for Your Practice"          Joint Meeting with San Mateo Dental Society          Speaker: Joshua Austin, DDS, MAGD</p>	<p><b>6:00-8:30 PM</b>          Crowne Plaza          4290 El Camino Real, Palo Alto</p>	<p><b>Exhibitor</b>            <b>\$350</b></p>	<p><b>Sponsor</b>            <b>\$600</b></p>
<p><i>*Please let me know if it is acceptable to donate \$25 from your payment towards a gift card for our raffle for this meeting.</i></p>			
<p>  <b>Friday, October 5th</b>          "Dental Malpractice Avoiding the Inevitable"          Speaker: Arthur Curley, JD</p>	<p><b>7:30-12:30 PM</b>          Crowne Plaza          4290 El Camino Real, Palo Alto</p>	<p><b>Exhibitor</b>            <b>\$350</b></p>	<p><b>Sponsor</b>            <b>\$600</b></p>
<p><i>*Please let me know if it is acceptable to donate \$25 from your payment towards a gift card for our raffle for this meeting.</i></p>			

**All 4 meetings pre-paid @ 15% discount = \$1190**

**Add \$45 fee per person, per program, other than yourself and 1 additional representative**  
**Additional person(s) for which we are buying a meal \_\_\_\_\_**

**TOTAL FEE FOR 2018 \$ \_\_\_\_\_**

NAMES OF ALL ATTENDEES FOR NAMETAGS \_\_\_\_\_

DO YOU NEED AN ELECTRICAL OUTLET AVAILABLE AT YOUR TABLE YES \_\_\_\_\_ NO \_\_\_\_\_

NOTE: Exhibitor/Sponsor acknowledges that payments are non-refundable and non-transferable for any reason and at any time. In order for your company to obtain maximum publicity, the Society's office needs to receive payment two months prior to meeting dates. **Until we are in receipt of this signed contract and payment in our office, the above marked dates will not be officially confirmed.**

EXHIBITOR/SPONSOR SIGNATURE (required) \_\_\_\_\_

Please return contract as soon as possible. There is a limit to the number of exhibitor spaces at each meeting.

**THANK YOU FOR YOUR SUPPORT!**

MAIL TO: MPDS, 220 Main St. STE 208A OR FAX 650/331-0541

I have indicated above the CE Programs for which I wish to be an Exhibitor/Sponsor

| Enclosed is a check for \$ \_\_\_\_\_ made payable to MPDS