



2025 CONTINUING EDUCATION EXHIBITOR'S AGREEMENT

Please reserve an exhibit space at the Delaware State Dental Society 2025 CE series. We agree to pay the sum as indicated below, which will include one six-foot draped table, two chairs, and wifi, continental breakfast and lunch for 2 reps, and complimentary parking.

Exhibitors are responsible for all fees unless written cancellation is received by the Delaware State Dental Society 20 days prior to each CE event. No refunds will be given on or after the 20-day deadline. Make checks payable to DSDS or include your MasterCard or VISA number, expiration date, and security code.

Exhibit set-up time for each course is 7:15 a.m. All exhibits must be operational by 7:45 a.m. Exhibit hours are 7:45 a.m. to the conclusion of the course. All exhibits must be dismantled and removed within one hour of the conclusion of the course.

EXHIBITOR INFORMATION (please print or type)

Company Name _____

Contact Person _____ **Title** _____

Signature _____

Address _____

City _____ **State** _____ **Zip** _____

Office Telephone (____) _____ **Fax:** (____) _____

Email Address: _____ **Cell #** _____

Description of Product or Service _____

Name(s) of representatives attending: 1) _____ 2) _____

Electricity Needed? YES _____ NO _____

PLEASE COMPLETE THE INFORMATION BELOW:

Rate per CE date listed below: **\$700/each**. Please mark the date(s) you would like to attend as an exhibitor.

Specials: Register for any 3 CE: \$1,900 (save \$200). Register for all 4 CE: \$2,400 (save \$400).

_____ **Friday, 4/11/25** _____ **Friday, 5/2/25** _____ **Friday, 10/10/25** _____ **Friday, 11/7/25**

Total payment enclosed \$ _____ **OR - Charge Credit Card #** _____

Exp. Date _____ **Security Code** _____

Name on Card (if different from above): _____

Address for Card (if different from above): _____

***Note: exhibit agreement is not in force until acknowledged by DSDS. Confirmation will be sent to your email address.**

Return to: DSDS, 892 Eichele Road, Perkiomenville, PA 18074

Email: dedentalsociety@gmail.com Telephone: 302-368-7634