

Date _____

- INSTRUCTIONS, PLEASE READ -

- A minimum of 50 percent of the charge for space rental must accompany this application, payment in full will be made on or before March 16, 2012.
- A confirmation will be sent once application & 50 percent deposit is received. This will serve as your invoice. Once booth is assigned, confirmation of booth number will be sent.
- Make checks payable to Washington State Dental Association.
- See attached 2012 Rules and Regulations for all terms and conditions.
- Please fill out application completely.
- Please refer to Exhibit Hall Map in Prospectus for booth layout.

■ **Exhibit Booth Pricing:**

Deluxe - \$1,400, \$1,600*
 Elite - \$1,600, \$1,800* Reserved - \$1,800*

* red type denotes Early Bird rate, * denotes regular rate

- PRODUCT/SERVICES LISTING -

From the "Technical Exhibits Classifications" (see next page) select the code number of the categories which best describes the product or services to be exhibited. Indicate those numbers and descriptions below. The number of product listings allowed per exhibitor is three for each 10'x10' booth.

CODE NUMBER	PRODUCT DESCRIPTION	BRAND NAME
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

- DENTAL PRODUCT DISTRIBUTORS -

The following companies will be represented with this contract. The PNDC limits the number of companies which can be represented in a single booth space to two. Each company may be listed under one code from the "Technical Exhibits Classifications" list.

COMPANY	CODE NUMBER
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____

WSDA USE ONLY

YEARS _____	LYB _____
ID # _____	AMT DUE: \$ _____
CK # _____ CC <input type="checkbox"/>	DATE _____
BALANCE _____	AMT REC'D _____
CK # _____ CC <input type="checkbox"/>	DATE _____
ASSIGNED BOOTH(S) _____	
KIT <input type="checkbox"/> INS <input type="checkbox"/> PERSONNEL <input type="checkbox"/> PIF <input type="checkbox"/>	

UPON SIGNING WE AGREE THAT:

1. Assignment of Space made by the Association will be considered as accepted unless rejected by us within fourteen (14) days from the date of notification of space assignment.
2. Fifty percent (50%) of the charge for space rental accompanies this application; payment in full will be made on or before March 16, 2012.
3. This application and all the provisions of the Official Rules and Regulations shall be incorporated as part of the contract if this application is accepted by WSDA. Any and all modifications to the official Rules & Regulations shall be incorporated into this agreement, which shall be deemed to be made fourteen (14) days from the date of notification of space assignment, unless the applicant otherwise notifies the Association. Submission of this application does not constitute making a contract; see Rule 8 for cancellation policy.
4. Exhibitors selling merchandise from the floor must comply with Washington State Department of Revenue. See rule 12 for guidelines.
5. All exhibit booths must be carpeted.
6. No company will be allowed to set up without the required certificate of insurance.

Amount Enclosed _____ Signed _____ Cardholder's Name _____

Check Enclosed Visa MasterCard American Express

Card # _____ Exp. Date _____ CVC number _____

1. Date charged _____ Amt _____
 2. Date charged _____ Amt _____

Company: _____
Exactly as you wish it to appear in program, signage, badges and website

Address: _____

City/State/Zip: _____

Phone: _____ Toll free: _____

Fax: _____ Web site: _____

SEND ALL FUTURE INSTRUCTIONS AND EXHIBIT BOOTH INFO TO:

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

Fax: _____

E-mail: _____

- SPONSORSHIP -

Yes! We'd like information about PNDC sponsorships

Contact name: _____

Contact phone: _____

Contact email: _____

- EXHIBIT HALL SIGN -

Please print or type your company name as it will appear on your exhibit sign **maximum** of 26 characters including spaces. (No sign will be made if not requested)

 You are authorized to reserve _____ 10' by 10' booth space(s) in the Washington State Convention & Trade Center Exhibit Hall for the use by the undersigned. Our space selections are:

1st Choice _____ 2nd Choice _____
 3rd Choice _____ 4th Choice _____

WE PREFER NOT TO BE LOCATED ADJACENT
 TO THE FOLLOWING SPECIFIC COMPANIES: