

EXHIBITOR BOOTH & SPONSORSHIP WORKSHEET

San Diego Dental Convention , June 21-22, 2019 and November 8-9, 2019

CHECK BOX FOR EVENT:

SAN DIEGO DENTAL CONVENTION

June 21-22, 2019

SAN DIEGO DENTAL CONVENTION

November 8-9, 2019

EXHIBITOR INFORMATION:

Company Name: _____ Phone: _____ Fax: _____
Key Contact: _____ Title: _____
Email: _____ Website: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Exhibitor 1: (Free) _____ Exhibitor 2: (Free) _____
Exhibitor 3: (+\$50) : _____ Exhibitor 4: (+\$50): _____ Qty__ X \$50= _____

BOOTH SPACE:

Booth # Preference

1-Day _____ 6'X 5' _____ or _____ \$500= _____
Standard —(2-Day) _____ 7'x 6' _____ or _____ \$850= _____
Prime —(2-Day) _____ 7'x 6' _____ or _____ \$950= _____
 Electrical Carpeting 6' Table
 Wireless Internet 2 Chairs Qty__ X \$50= _____
 Speaker Lounge Drink Station Sponsorship
 Note Taking Paper Name Badge Holder Lanyards
 Lunch or Breakfast Registration Bag Print Material Insert
 Wine and Cheese Social Slideshow on Exhibit Hall PowerPoint
 Attendee List No Email Supply Drive Bag Logo Sponsorship
 Poster Advertisement Speaker Introduction Qty__ X \$500= _____

LECTURE OPPORTUNITY:

Lecture & Convention Sponsor _____ \$2,950=
Lecture & Exhibit Hall Sponsor _____ \$1,950=
Website Banner ADVERTISEMENT " 6 Month Contract @ \$100 Month " _____ \$600=

SUBTOTAL: _____ Subtotal = _____
ADD 3% for credit card convenience fee (NO fee with check) _____ Subtotal _____ X 3% = _____

GRAND TOTAL: _____ =

PAYMENT INFORMATION:

Debit/Credit Card First Name: _____ Last: _____
Visa _____ MasterCard _____ Amex _____ Discover _____ Check _____
Card number: _____ Exp: _____ 4-Code: _____

It is hereby certified that myself and the company I represent have read and will abide by the terms and conditions on this form and in the Exhibitors Guide. The above guest are not dentist. Personnel listed are employees of this company.

Signature: _____ Date: _____ Time: _____

+\$50 Raffle Prize to give away to CEA Dental Members

Send Payment to: CEA Dental 4242 Summit Drive, La Mesa, CA 91941 Or Register and pay at: www.ceadental.com