

# MANDATORY APPROVAL FORM

**CDS USE ONLY:**

Date: \_\_\_\_\_ ID#: \_\_\_\_\_

## DEADLINE: JANUARY 15

This form is required for companies that plan for height or size variances, theater seating in booths, sound projection, celebrities and/or all other promotional activities.

**To complete this application, please print or type the information below, or fill using Acrobat Reader.**

Sign and submit copy to: Chicago Dental Society, 401 N. Michigan Ave., Suite 200, Chicago, IL 60611-5585, or [exhibits@cds.org](mailto:exhibits@cds.org).

### EXHIBITOR INFORMATION (TYPE OR PRINT)

COMPANY NAME

EXHIBIT CONTACT

ADDRESS

CITY

STATE

ZIP

EMAIL (REQUIRED)

EXHIBIT CONTACT PHONE

FAX

### REQUEST APPROVAL FOR

Check all that apply.

- Height variance of booth structure  
(include detailed rendering of booth)
- Height variance of hanging sign  
(include detailed rendering of booth)
- Theater-style seating for demonstrations  
(include detailed rendering of booth)
- Sound projection
- Celebrities (include name of celebrity; schedule they will be at the booth)
- Raffles/Drawings (must include rules of raffle/drawing; prize(s); schedule of drawing winner(s))
- Early Targeted Move-in Request
- Other: \_\_\_\_\_

### DESCRIPTION

Please list a brief description or attach a diagram of the item(s) for which you are requesting approval (Attach a separate sheet if necessary).

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**YOUR REQUEST IS NOT APPROVED UNTIL YOU RECEIVE WRITTEN CONFIRMATION FROM CDS.**

**EXHIBITOR MUST BRING WRITTEN CONFIRMATION FROM CDS ONSITE.**

PRINTED NAME

TITLE

SIGNATURE

DATE

- I have read and will abide by the terms and conditions stated on this form and in the explanation of the exhibitor rules and regulations.

