

# NOT-FOR-PROFIT EXHIBIT APPLICATION

CDS USE ONLY:

Date: \_\_\_\_\_

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

## DEADLINE: MAY 31

### TYPE OR PRINT THIS APPLICATION. SIGN AND SUBMIT COPY TO:

Chicago Dental Society, 401 N. Michigan Ave., Suite 200, Chicago, IL 60611-5585.

### EXHIBITOR INFO

**THE COMPANY NAME WILL APPEAR IN ALL MIDWINTER MEETING PUBLICATIONS AND BADGES AS SHOWN ON THIS FORM.**

Company name: \_\_\_\_\_

Division of/cross reference: \_\_\_\_\_

Address: \_\_\_\_\_

City/State and Country/Zip or Postal Code: \_\_\_\_\_

Exhibit contact person: \_\_\_\_\_

Exhibit contact phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Customer service phone: \_\_\_\_\_

Email (required): \_\_\_\_\_

Contact signature: \_\_\_\_\_ Date: \_\_\_\_\_

In taking a complimentary booth space, we agree to keep the booth staffed during the exhibit hours of the meeting.

### AMENITIES

As part of the complimentary booth space, the Chicago Dental Society will provide (mark each section):

Hardwall/Side rails:

Need

Do not need

Seating (choose one):

Chairs (2)

Stools (2)

Table (choose one):

6' long draped table: 30" tall

6' long draped table: 42" tall

8' long draped table: 30" tall

8' long draped table: 42" tall

Waste basket (limit one)

Sign – of uniform style – indicating organization's name (limit one)

### NOT INCLUDED

The following are not included as part of this complimentary service. Your organization is responsible for:

- Additional furniture
- Drayage charges/storage/shipping
- Electrical service
- Internet service
- Labor charges for erecting/dismantling custom booth
- Phone service

**FOR SERVICE ORDER FORMS AND A LIST OF OFFICIAL MIDWINTER MEETING VENDORS, GO TO [WWW.CDS.ORG](http://WWW.CDS.ORG).**

**PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS.**



CHICAGO DENTAL SOCIETY™  
MIDWINTER MEETING

401 N. Michigan Ave., Suite 200, Chicago, IL 60611-5585

155th MIDWINTER MEETING

FEB. 20 – 22, 2020 • [www.cds.org](http://www.cds.org)

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