



Inland Northwest Dental Conference

Sponsored by: Spokane District Dental Society
May 12-13, 2022: Northern Quest Resort and Casino

Conference Supporter Pamphlet

REGISTRATION & PAYMENT DEADLINE: April 28, 2022

STANDARD EXHIBITOR TABLE:

Early Bird: \$795; After March 31st: \$995

Includes: Two booth staff, 8' table, chair, wastebasket and signage, flyer or other insert in the registration packet.

GOLD LEVEL EXHIBITOR TABLE: \$1,295 (3 AVAILABLE)

Includes: Two booth staff, 8' table, chair, wastebasket and signage, flyer or other insert in the registration packet. Plus running of a 30 second bumper video during a breakout or workshop session. Sponsor to provide bumper video.

PRESENTING SPONSOR: \$9,995

Logo recognition and co-branding on conference materials, two standard exhibit tables as described above, introduction/welcome address at the start of the conference, 30 second bumper video played at least once per day. Sponsor may also provide logo'd presentation folders for registration packets as well as an insert or flyer. Sponsor to provide bumper videos.

GOLD: \$6,995 (2 available)

Sponsor logo on the conference website, flyer or other insert in the registration packet. 30 second bumper video played prior to lunch, standard exhibit table as described above, lunch sponsor acknowledgment and signage on the tables. Sponsor to provide bumper video.

SILVER: \$2,995 (2 available)

Sponsor logo on the conference website, 30 second bumper video, standard exhibit table as described above, flyer or other insert included in the registration packet. Morning coffee/light breakfast sponsor acknowledgment and signage on the tables. Sponsor to provide bumper video.

BRONZE: \$1,595 (9 program sponsorships available)

Sponsor logo on the conference website, flyer or other insert included in the registration packet, standard exhibit table as described above, 30 second bumper video played at beginning of sponsored session, intro of one workshop presenter during workshop or breakout session. Sponsor to provide bumper video.

RECEPTION SPONSOR: \$4,595

Sponsor logo on the conference website, 30 second bumper video to be played during the first day of the conference, standard exhibit table as described above, flyer or other insert included in the registration packet, Thursday evening reception sponsor acknowledgment and signage throughout the room. Sponsor to provide bumper video.

Coffee Break Sponsor: \$995 (2 available)

Acknowledgement on conference materials, acknowledgement at the coffee break stations for sponsored day, onsite signage, flyer or other insert in the registration packet.

Supporter Registration:

Standard Exhibitor Table* - early: \$795 \$ _____
Standard Exhibitor Table* after 3/31: \$995 \$ _____
Gold Level Exhibitor Table*: \$1,295 \$ _____
TOTAL \$ _____

Supporter Levels

Presenting: \$9,995 \$ _____
Gold: \$6,995 \$ _____
Silver: \$2,995 \$ _____
Bronze: \$1,595 \$ _____
Reception Sponsor \$2,995 \$ _____
Coffee Break Sponsor: \$ 995 \$ _____
TOTAL \$ _____

*For electrical or hard wired internet, please contact info@spokanedentalsociety.org

Registration:

Company: _____ Mailing Address: _____

City: _____ State: _____ Zip: _____

Contact Person completing registration: _____

Email _____ Phone _____

Payment: Pay by credit card or check
____ Check ____ VISA ____ MasterCard ____ AMEX
Card # _____
Security Code _____ Exp. Date _____
Name on Card: _____
Bill to Address: _____

Signature _____

UPON SIGNING WE AGREE THAT:

Assignment of space made by the Society shall be considered accepted unless rejected by us within fourteen (14) days from the date of notification of space assignment.

This application and all the provisions of the Terms & Conditions shall be incorporated as part of the contract once this application is accepted by SDDS. Any modifications to the Terms and Conditions 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 Society. Submission of this application does not constitute a contract.

See Rule 7 for cancellation policy.

Signature _____

Make checks payable to SDDS

Mail to: Spokane District Dental Society, 23403 E. Mission Ave, Suite 104, Liberty Lake, WA 99019

Phone: 509-838-0436 Fax: 509-838-5040 Email: info@spokanedentalsociety.org