

Exhibitor and Sponsorship Opportunities

Maine Dental Association Convention 2020

May 28-May 30 - Samoset Resort - Rockport

Dear Exhibitor:

I am excited to invite you to the Maine Dental Association's 2020 Annual Convention, which will be held May 28-May 30 at the Samoset Resort in Rockport. **Exhibits will be held on Friday, May 29, from 10:00 a.m. to 4:00 p.m.**

EXHIBITOR SPACE AT THE SAMOSET RESORT IS LIMITED, AND BOOTHS WILL BE RESERVED ON A FIRST-COME, FIRST-SERVED BASIS.

We have included both Friday's and Saturday's continuing education courses as part of the MDA's 2019-2020 Continuing Education Package Plan. That will help to increase the number of members attending the convention. To entice attendees to spend time with exhibitors, we will be offering a buffet to convention attendees on the exhibit floor on Friday. We actively encourage attendees to visit exhibitor booths, through a punch card ticket and raffle prize drawing. A variety of prizes will be available. **We would ask that you to please donate an item for the drawings.** Winners will be drawn on Friday at the end of the continuing education course. There will be another opportunity to meet with attendees during a reception early Friday evening from 4:30-5:30 p.m. You are invited to attend as our guest! **There will be an exclusive drawing at the reception, with the prize being a complimentary booth at next year's convention for an exhibitor who provides their business card during the reception.**

The MDA is also providing each attendee a gift bag. If you have literature or items you would like us to place in the bags, please ship them to the Samoset Resort before the convention, and mark the package for the MDA registration area.

Please see the enclosed prospectus with details about the exhibits. A contract, along with a variety of sponsorship opportunities, is included. Please note the "early bird" discount. If you have questions about the exhibits, please contact Lucas Knowles at the MDA Office (207-622-7900 or lknowles@medental.org).

Sincerely,



Angela Westhoff
MDA Executive Director



MAINE
DENTAL
ASSOCIATION

MDA 2020 Annual Convention Exhibitor Prospectus

EXHIBITOR SPACE AT THE SAMOSET RESORT IS LIMITED, AND BOOTHS WILL BE RESERVED ON A FIRST-COME, FIRST-SERVED BASIS.

Date of Exhibits: Friday, May 29, 2020

Location: Samoset Resort, Rockport, Maine

Time: Exhibits are open from 10:00 a.m. to 4:00 p.m. Friday
Set-up can occur any time after 8:30 a.m. on Friday

Booth Description: 6-foot skirted table, two chairs provided
Electrical outlets available, if needed
(Requests for electrical outlets must be made on the exhibitor contract)
2 box lunches will be distributed to each exhibitor in advance of attendee lunch

Cost: **\$900 for first BOOTH / \$850 for each additional BOOTH**
Payment must accompany application. You may pay by check or credit card.

2019 Attendance: 291 people - 140 dentists, 88 hygienists/assistants/staff, 31 students

2018 Attendance: 322 people - 122 dentists, 109 hygienists, 44 students, and 9 staff

Booth Assignment: Exhibitors will receive booth assignments the morning of the exhibits.

Character of Exhibits: The Maine Dental Association reserves the right to decline or prohibit any exhibit which, in its judgment, is not suitable to or is not keeping with the character of the exhibition. This provision is all-inclusive, and concerns persons, things, conduct, printed materials, and souvenirs.

Refunds: All cancellations must be in writing and received by the Maine Dental Association on or before May 1, 2020. If cancellations are received after May 1, 2020, the entire booth fee will be retained by the Maine Dental Association.

Hotel Reservations: If needed, any hotel reservations must be made directly with the Samoset Resort.

Attendance Incentive: The Maine Dental Association will be providing a free buffet on the exhibit floor to convention attendees during the lunch break, and also a reception later on Friday. Attendees may also participate in raffle drawings by obtaining punches on their raffle ticket from vendors. Drawings will be held Friday after the course. We would ask that you please donate an item for the drawings. Please let us know what you are offering for the raffle on the exhibitor contract, and make sure it is displayed on the raffle table in the exhibit hall.

Reception/Exhibitor Drawing: There will be another opportunity to meet with attendees during a reception on Friday from 4:30-5:30 p.m. There will be a exclusive drawing at the reception, with the prize being a complimentary booth at next year's convention for an exhibitor who provides a business card at the reception.

Gift Bags: The MDA is giving each convention attendee a gift bag. If you have literature or items you would like us to place in the bags, please ship them to The Samoset Resort and mark package for Maine Dental Association registration area. Please indicate on the exhibitor contract if you have items for the attendee bags.

Products to be Mailed: If you need to mail your product and/or equipment ahead, please mail to The Samoset Resort, 220 Warrenton Street, Rockport, ME 04856.

Be sure to mark the package for Maine Dental Association registration area.

Please ship to arrive no earlier than seven days in advance.

Contact the Samoset Resort with any questions (800-341-1650).

Maine Dental Association Annual Convention Exhibitor Contract

PRICE PER BOOTH-\$900 ADDITIONAL BOOTH-\$850

You are hereby authorized to reserve exhibit space for our use at the 2020 Annual Convention of the Maine Dental Association. We hold the Maine Dental Association harmless from claims of any nature arising from our occupancy of assigned space, or from activities of our employees or representatives.

____ FIRST TIME ____ PREVIOUS EXHIBITOR

EXHIBITING COMPANY _____

COMPANY NAME (as will appear in program booklet) _____

ADDRESS _____ PHONE _____

CITY _____ STATE _____ ZIP _____ EMAIL _____

REPRESENTATIVE in charge of exhibit _____

ADDRESS (if different than company) _____ PHONE _____

CITY _____ STATE _____ ZIP _____ EMAIL _____

PRODUCT(S) to be exhibited _____

OUR COMPETITORS ARE _____

CONTRACT EXECUTED BY _____

(name and title—PLEASE PRINT)

Contract Must Be Signed to be Valid _____

(sign name)

Date of Exhibits: May 29, 2020 (10:00 a.m. — 4:00 p.m.)

TERMS: Full payment must accompany this application. \$900 for first BOOTH. \$850 for an additional BOOTH.

*Item(s) for Raffle: YES NO Item(s): _____

*Item(s) for gift bags: YES NO Item(s): _____

of electrical outlets needed: _____

List of on-site representatives (No more than five reps per exhibit space.)
ONLY REPS FROM THIS COMPANY ALLOWED AT BOOTH

Where would you prefer convention information be sent?

1. _____

E-MAIL _____

2. _____

Or Mail:

3. _____

NAME _____

4. _____

ADDRESS _____

5. _____

CITY _____

Please return this form with your check payable to the MDA or complete credit card form enclosed and mail to **Maine Dental Association, PO Box 215, Manchester, ME 04351-0215**, fax to **207-622-6210**, or email to **lknowles@medental.org**

STATE _____ ZIP _____

BOTH E-MAIL AND MAIL _____

A refund of a prepaid reservation will be made upon written request to the Maine Dental Association on or before May 1, 2020. If cancellations are received after May 1, 2020, the entire booth fee will be retained by the MDA.

Please note: To ensure a listing in the Annual Convention program booklet, the exhibitor contract must be returned with payment no later than May 1, 2020.

PRICE PER BOOTH	\$900
ADDITIONAL BOOTH	\$850
TOTAL DUE	\$ _____

2020 Maine Dental Association Convention - May 28-May 30 Samoset Resort, Rockport, ME

Convention Sponsorship Opportunities

Please check the sponsorship(s) you would like to partner with the MDA on.

PRESENTING SPONSOR - TAKEN

**CORPORATE SPONSOR - \$1,000 AND ABOVE - LOGO ON SIGNAGE/MATERIALS,
COMPLIMENTARY AD IN PROGRAM BOOKLET**

GENERAL SPONSOR - \$500 TO \$1,000 - NAME ON SIGNAGE/MATERIALS

PLEASE NOTE: *In addition to the tickets/vouchers noted, sponsorship will include acknowledgement in printed promotional materials for the MDA convention, provided form/contract are received in a timely manner, and acknowledgement of support through verbal recognition and/or signage. Sponsorship will also include acknowledgement on the Maine Dental Association's website.*

NEW THIS YEAR

____ \$1,800 Tote Bag Sponsorship - Company logo and MDA logo on each of four bags given to all attendees (**ONE AVAILABLE**)

____ \$1,000 Lanyard Sponsorship - Logo on lanyards available for all attendees to wear with name badge (**ONE AVAILABLE**)

____ \$500 PER DAY Sponsor charging station available to all attendees (**ONE DAY AVAILABLE**)

Speakers

____ \$2,500 PER DAY Sponsor Dr. Tieraona Low Dog's course on May 29 and/or Dr. John Svirsky's course on May 30

Special Events

____ \$1,000 Sponsor Convention Reception (**FRIDAY, 4:30-5:30 PM; THREE AVAILABLE**)

____ \$1,000 Sponsor Dental Student/New Member Lunch and Learn (*includes two tickets*) (**SATURDAY, 12-1:30 PM; THREE AVAILABLE**)

____ \$1,000 Sponsor Dental Student Reception (**SATURDAY, 5:30-6:30 PM; THREE AVAILABLE**)

____ \$1,000 Sponsor President's Awards Dinner (*includes two tickets*) (**SATURDAY, 6:30-8 PM; THREE AVAILABLE**)

Additional Opportunities

____ \$1,500 Sponsor lunch offered to all attendees (**FRIDAY, 12-1:30 PM**)

____ \$750 Sponsor refreshment breaks offered to all attendees (**TWO AVAILABLE - FRIDAY AM, PM**)

____ \$750 Sponsor continental breakfast offered to all attendees (**FRIDAY, SATURDAY AM**)

____ \$500 (**HALF DAY**) ____ \$1,000 (**FULL DAY**)
Sponsor audio/visual for convention
(*Logo projected during breaks*)

Convention Program (ALL - ONE AVAILABLE)

____ \$1,000 Full-page color ad on back cover

____ \$600 Full-page color ad on inside front cover

____ \$250 Half-page color ad inside

Payment:

Payment must be received by February 7, 2020, to assure printed acknowledgement in the convention brochure mailed to dental offices. To be listed in the program booklet given to all attendees at the convention, payment must be received by May 1, 2020.

Please make check out to Maine Dental Association or complete credit card information below and return to: MDA, PO Box 215, Manchester, ME 04351, fax to 207-622-6210, or email to lknowles@medental.org.

Thank you, and see you at the 2020 convention!

Maine Dental Association

Please Print Clearly

Your Name: _____ Business Name: _____

Name on Card: _____ Phone: _____

Billing Address on Card: _____

City: _____ State: _____ Zip Code: _____

Email: _____

VISA 

MasterCard 

Discover 

Card #:

Security Code: (3 digits on back of card) Exp. Date:
Month Year

Amount \$ _____ Cardholder Signature: _____

Disclaimer: A \$50.00 fee will be added to payment if provided information does not match credit card information on file with credit card company and has to be resubmitted to credit card company. By signing above you agree to these terms and conditions.

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|---------------------------------------|---|--|--------------------------------------|
| <input type="checkbox"/> Advocacy | <input type="checkbox"/> Annual Convention | <input type="checkbox"/> Charitable Foundation | <input type="checkbox"/> Dues |
| <input type="checkbox"/> Exhibitor | <input type="checkbox"/> Individual CE | <input type="checkbox"/> NewsJournal Advertising | <input type="checkbox"/> PAC |
| <input type="checkbox"/> Package Plan | <input type="checkbox"/> Roster Advertising | <input type="checkbox"/> Sponsorship | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> CNA | | | |

Please be sure to print legibly and note disclaimer: A \$50 fee will be added to your payment if provided information does not match credit card information on file with the credit card company or written information is unreadable - and has to be resubmitted to credit card company. By signing above, you agree to these terms and conditions.