

Minnesota Student Dental Society

Application for ASDA Vendor/Placement Exhibit Space Wednesday, November 9th 2016

We agree to accept this contact for an exhibit space that includes one table, table covering, two chairs and an exhibitor sign. We further agree to pay the \$350.00 fee for the exhibit space. Our check payable to **MN ASDA** is enclosed.

Company Name: _				
Contact Person:				
Exhibitor Name(s):				
_				
Phone Number:	Em	nail Address:	·	
Exhibit Sign to Read:				
Mailing Address:				
City, ST, Zip Code:				
List of Items Displayed an	nd Services Offered:			
	late your special requests.) Find can't block the view of other		have a pop-	up display it needs to
Placements are made as	se select at least three): 1: _s follows: Applications receive years. After the deadline all p	ed by the deadline	e will be plac	ed based on the
Door prizes will be given a	away to attendees. Would yo	ou like to contribu	ite a door priz	ze?
If yes, please list item(s):_				
Return by October 12, 2	electrical outlet (additional 2016 for best placement to: ent Dental Society	fee of \$25.00)		

Minnesota Student Dental Society 1335 Industrial Blvd., Minneapolis, MN 55413 Phone: (612) 767-8400 ext 103 Fax: (612) 767-8500

Cancellation Policy

Vendors who reserve a placement table and who are able to find an employee before the fair will receive a full refund if they notify Dawn Jensen at the Minnesota Dental Association by October 1, 2016. After October 1, if we are able to fill the table a partial refund of \$200.00 will be issued. No refund will be issued for spaces we are unable to fill.