



Detroit District Dental Society

Sponsorship and Exhibit Form 2023 & 2024

6 Parklane Blvd., Ste 434, Dearborn, MI 48126

detroitdentalsociety.org • centraloffice@detroitdentalsociety.com • 313.337.4900

Sponsorship of Detroit District Annual All Branch Meeting - March 6, 2024

- Sponsorship \$600.00 per exhibit table (event limited to five exhibitors)
- Location: Laurel Manor, 39000 Schoolcraft Rd., Livonia, MI 48150
- Attendance 175 - 250 people
- Exhibit Table at event, Logo on signage at event
- Recognition on all marketing materials for the event and from the podium at the program, website listing

Sponsorship of Detroit District Branch Meeting – Dinner Meetings various dates 2023-2024

- Sponsorship \$250.00 - \$500.00 per exhibit table (event limited to one exhibitor per event)
- Must contact the DDDS office to confirm date availability and location
- Locations: Dearborn, Novi, Grosse Pointe, and Detroit
- Attendance 40 - 120 people
- Exhibit Table at event, recognition on all marketing materials for the event, podium welcome (4 minutes) at the program, and website listing

Sponsorship of Detroit District New Dentist Dinner CE Program – November 2, 2023

- This program is for member and non-member dentists within ten years of graduation.
- Sponsorship \$1000.00 (Presentation sponsor - offering content to the presentation and time at podium) (event limited to one exhibitor per event)
- Sponsorship \$500.00 Exhibit Table at event, recognition on all marketing materials for the event, podium welcome (4 minutes) at the program and website listing
- Location: Doubletree Detroit Dearborn Hotel,
- Attendance 75 - 150 people

Sponsorship of Detroit Social Events with Detroit Red Wings Hockey – Date TBD in 2023

- Sponsorship \$700.00 per sponsor (event limited to two sponsors)
- Location: Little Caesars Arena, Detroit, MI
- Attendance 50 – 100 people. Seats gondola section for group. Social Event for Dental Society.
- Exhibit Sign at event, Logo on signage at event, two-four tickets to the event for networking time
- Recognition on all marketing materials for the event website listing. Greetings to all participants.

Sponsorship of Detroit Social Events with Detroit Zoo – Date TBD in Summer 2024

- Sponsorship \$2500.00 per sponsor (event limited to two sponsors) (one sponsor \$5000.00)
- Location: Detroit, Zoo, Royal Oak, MI
- Attendance 100 - 200 people. Luncheon private pavilion area. Kid event educational fun program. Social Event for Dental Society.
- Exhibit Sign at event, participation staff up to 15 tickets. Man welcome tent – meet all participants.
- Recognition on all marketing materials for the event website listing. Greetings to all participants.

Submit Sponsorship Agreement

To confirm your sponsorship, complete and sign this form and submit to Marcy Dwyer, DDDS office via:

Email: centraloffice@detroitdentalsociety.com Fax: 844-636-2585 Phone: 313-337-4579

Mail: DDDS, 6 Parklane Blvd., Ste 434, Dearborn, MI 48126

Make check payable to Detroit District Dental Society.

Sponsorship Items Selection (select all that apply)

Total Amount \$ _____

- All Branch Meeting 2024
- Provide Speaker Branch Meeting 2023 or 2024
- Sponsorship Branch Dinner Meeting: Central/Southwest
- Sponsor Branch Dinner Meeting: Eastside

- Sponsorship Branch Dinner Meeting: Westside
- Sponsorship New Dentist Program Dinner 2023
- Sponsorship Red Wings Hockey Event 2024
- Sponsorship Detroit Zoo Summer Event 2024

Deposit, Payment and Cancellation Policy

Deposit of 50% of the sponsorship due within two weeks of initial form submission. Final payment due thirty days prior to event date. No cancellations or refunds after receipt of deposit and final payment

Payment Method

- Please Invoice Check will be mailed Credit Card

Sponsoring Company Information for Detroit District Dental Society

Contact Name	
Title	
Company	
Street Address	
City, State, Zip	
Phone #	
Email	
Signature	

Credit Card Payment

Type <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> AmEx	Credit Card Billing Address:	
Cardholder <input type="checkbox"/> Corporate Card <input type="checkbox"/> Personal/Individual	Cardholder Name:	
Credit Card #	Address 1:	
	Address 2:	
Expiration Date	CVV Code	City, State, Zip
Payment Amount: \$	Phone	
Authorized Signature	Date	
Email (for receipt/purchase confirmation):		

Liability:

It is expressly understood and agreed between exhibitors and the Society that the Detroit District Dental Society shall be under no liability for loss of, or damage to, goods or property of exhibitors, as well as accidents to representatives of exhibitors, and each exhibitor on signing space contract expressly releases the Detroit District Dental Society from and agrees to indemnify it against all claims. The Society cannot guarantee exhibitors against loss by theft or otherwise. All exhibitors are URGED to carry "All Risk Insurance" for the meeting/event.

Authorizing Agent: in signing and submitting this contract for exhibit space, we agree and abide by all the rules and regulations as outlined in the provisions of this contract. We also agree to abide by subsequent additions to the event's rules and regulations which may become necessary for the good of the exhibition, including all on-site rulings which may be made by the Detroit District Dental Society exposition manager and committee. The Detroit District Dental Society does not endorse any product or company by accepting sponsorship for a program. All sponsors must be approved by the Detroit District Dental Society Committee as having a purpose that is dental related and viable information for attendees.

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