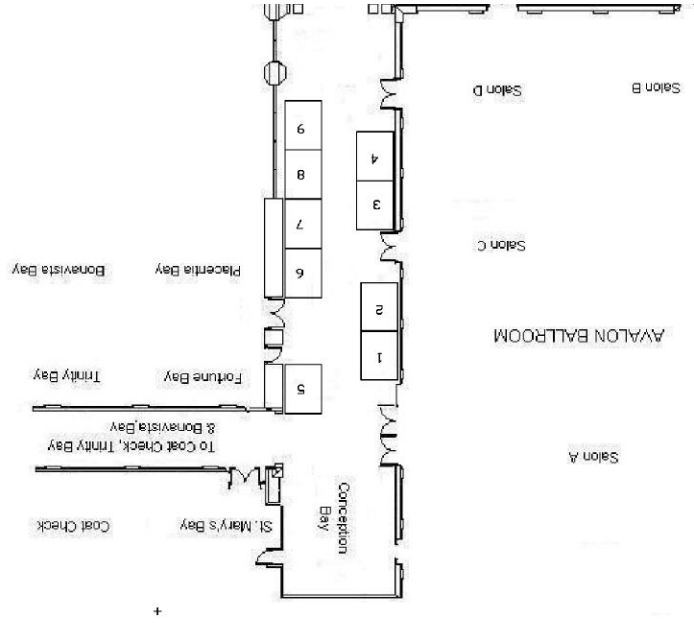


This year Exhibit space will be reserved on First Pay, First Choice Basis. We will be assigning the exhibitors booths before the convention.

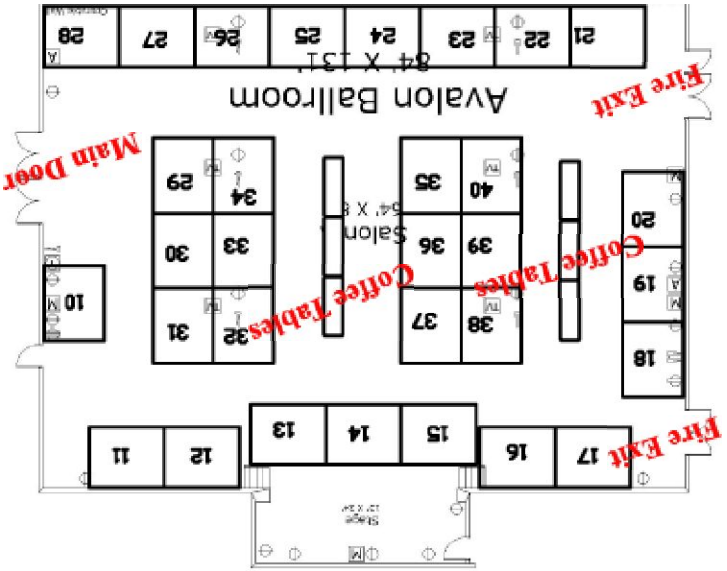
Booth Selection:

First Choice: _____ Second Choice: _____ Third Choice: _____

CRUSH LOBBY



SALON A



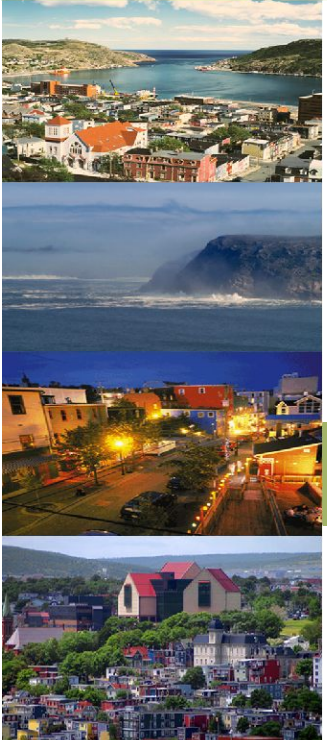
Exhibitor's Prospectus



ORAL HEALTH CONVENTION 2010

St. John's, NL
May 27-29

The Delta Hotel~St. John's, Newfoundland and Labrador
120 New Gower Street, Canada, A1C 6K4



Pictures are Copyright © City of St. John's and Copyright © The Delta Hotel

2010 Oral Health Convention

Newfoundland & Labrador Dentists, Dental Hygienists, Dental Assistants and Office Managers are co-sponsoring a joint Oral Health Convention. The Convention Committee would like to extend an invitation to your company to exhibit.

Fee

Crush Lobby

The Exhibitor Registration will be \$550.00 per 7.5 x 10 foot exhibit booth.

Salon A

The Exhibitor Registration will be \$600.00 per 8 x 10 foot exhibit booth.

Every booth will have pipe and drape and a table and two chairs. Included in the purchase of a booth space is one complimentary ticket to the President's Dinner on Friday evening and Fun Night on Saturday evening.

As you will see on the back page, you get to choose your booth space again this year. We have 31 booths in Salon A and 9 Booths in the Crush Lobby.

Set-Up

Set-up may commence after 7:30 am on Thursday, May 27, 2010 morning and dismantling will commence anytime after 12:00 pm on Saturday.

Hotel

For ease of booking, inform the hotel of the guestroom block code GCNLDA10. A block of guest rooms will be held at the hotel under the group rate until April 26, 2010. To book a room, call toll free 1-888-733-3582.

Room Rate

Delta Room Single / Double Occupancy	\$175.00	Deluxe	\$205.00
Delta Premier Single / Double Occupancy	\$195.00	Signature Club	\$250.00

This year Exhibit space will be reserved on First Pay, First Choice Basis. We will be assigning the exhibit booths before the convention. Please see floor plan on back of Registration Form.

Trade Show Hours: 11:00 am - 5:00 pm on Thursday
 8:45 am - 5:00 pm on Friday
 8:45 am - 12:00 pm on Saturday

If you have any questions or concerns please call Lesley at (709) 579-2362 or email oralhealth2010@nfld.net



Exhibitor Registration Form

Company Name: _____

Mailing Address: _____ City: _____

Province: _____ Postal Code: _____

Exhibitors Name(s):

Please indicate who will be attending the President's Dinner and Fun Night by checking the box.

President's Dinner Fun Night

Name: _____ Email Address: _____ Tel: _____

Name: _____ Email Address: _____ Tel: _____

Name: _____ Email Address: _____ Tel: _____

Tickets

Presidents Dinner- Friday, May 28, 2010 \$75.00 per person 1 Complimentary Ticket per booth purchase
 Cocktails: 7:00 pm Dinner: 8:00 pm **Total Number of Tickets** _____

Make your dinner choices below: (All dinners will be served with a Caribbean Spiced Squash with Apple Cider Sour Cream Drizzle Soup & Cheese Cake)
 Supreme of Chicken _____ Salmon in Chardonnay _____ Herbed Risotto Peppers (Grilled Vegetables & Roasted Garlic Pesto) _____

Fun Night - Saturday, May 29, 2010 \$60.00 per person 1 Complimentary Ticket per booth purchase
Total Number of Tickets _____

Special diet: _____

Payment

Cheque (payable to: Newfoundland & Labrador Dental Association) Money Order Visa Mastercard

Card No: _____ Exp. Date: _____

Total Amount: _____ Cardholder's Signature: _____

Mail this form with payment to:
 Newfoundland & Labrador Dental Association
 Att: Oral Health Convention 2010
 401-139 Water Street, St. John's, NL A1C 1B2

Fax your registration form: (709) 579-1250 **Email your registration form:** oralhealth2010@nfld.net