



*Thank you for your interest in becoming involved with the West Coast District Dental Association. Our district includes 2,000 member dentists located in 13 counties on the west coast of Florida.*

*There are several ways you can reach our members; become a partner, advertise in the newsletter and/or E-newsletter, exhibit at our annual meetings and/or sponsor special events.*



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### **WEST COAST DISTRICT DENTAL ASSOCIATION**

1114 Kyle Wood Lane • Brandon, Florida 33511  
 (813) 654-2500 • FAX (813) 654-2505  
 www.wcdental.org • e-mail: lissette@wcdental.org

# Welcome

*There are several ways you can reach our members...*

**You can participate in any or all!**

- *Become a partner*
- *Advertise in the newsletter*
- *Advertise in the E-newsletter*
- *Exhibit at the annual winter meeting*
- *Exhibit at the annual summer meeting*



# Become a Partner

## Platinum Partner - \$5,400

Table Top (speaker room or pre-function area) at the Annual Meeting  
Table Top at the Summer Meeting - Naples  
½ page ad for one year (three printed issues) of the WCDDA “Checkup” (circulation 2000)  
\*Sponsor three meeting events from Annual and/or Summer Meeting  
Listings in all Annual Meeting and Summer Meeting printed materials  
Sponsorship level included on WCDDA’s website with company logo and link  
Company logo on course screen prior to presentation  
Company logo with sponsorship level included in the WCDDA’s E-newsletter (9 editions; circulation 1,500)  
Sponsor/Advertising space in electronic version of the WCDDA Leadership Directory  
*Choose this partnership level and save \$3,525*

## Gold Partner - \$3,600

Table Top (pre-function area) at the Annual Meeting or Summer Meeting  
½ page ad for one year (three printed issues) of the WCDDA “Checkup” (circulation 2000)  
\*Sponsor two meeting events  
Listings in all Annual Meeting and Summer Meeting printed materials  
Sponsorship level included on WCDDA’s website with company logo and link  
Company logo on course screen prior to presentation  
*Choose this partnership level and save \$1,650*

## Silver Partner - \$2000

Table Top (pre-function area) at the Annual Meeting or Summer Meeting  
¼ page ad in one issue of the WCDDA “Checkup” (circulation 2000)  
\*Sponsor one meeting event  
Listings in all Annual Meeting and Summer Meeting printed materials  
Sponsorship level included on WCDDA’s website with company logo and link  
Company logo on course screen prior to presentation  
*Choose this partnership level and save \$550*

## \*Meeting Events:

Continuing Education Self-Study Packets (Annual or Summer Meeting)  
Special Interest Activities (Past President’s Breakfast – Annual Meeting)  
Business Meetings (Annual or Summer Meeting)  
Coffee Breaks (Annual or Summer Meeting)  
Lanyards (Annual Meeting)  
Affiliate President Round Table Meeting (Summer Meeting)  
Officer Installation/Wine & Cheese Reception (Summer Meeting)  
Officers’ Retreat (Summer Meeting)  
Summer Meeting Activities (i.e. golf, tennis, kids night out)

*\*Meeting Events selected upon approval of the West Coast District Dental Association’s Program Committee.*

Partnership levels are based on a yearly term.

**Contract included on page 10 - For more information contact the WCDDA at (813) 654-2500.**

# Association Newsletter

## Advertising Information/Contract

**Issuance:** January, May, September  
**Circulation:** Approximately 2000 Florida West Coast Dentists  
**Contract Deadlines:** 2 months prior to publishing  
**Cancellation:** Ad cancellations will not be accepted after the contract deadline.  
Jan: November 1<sup>st</sup>, May: March 1<sup>st</sup>, Sept: July 1<sup>st</sup>

### Advertising Rates per Issue:

<b>Full Page:</b>	8" x 10.125"	\$778.05	<b>Page:</b>	8.5" x 11"
<b>Half Page:</b>	8" x 4.875" Horizontal	\$409.50	<b>Color:</b>	Full Color
<b>Quarter Page:</b>	3.875" x 4.875" Vertical	\$245.70	<b>Screen:</b>	Yes
<b>Eighth Page:</b>	3.875" x 2.5"	\$131.04	<b>Bleed:</b>	None
<b>Vendor/Non Mbr.</b>	25 words or less	\$ 66.00	<b>Commission:</b>	None
<b>Classified:</b>	each extra word	\$1.10	<b>Special Position:</b>	None
<b>Member Classified:</b>	25 words or less	\$33.00	<b>Printing Method:</b>	Offset
	each extra word	\$1.10	<b>Paper:</b>	80lb. Gloss Text
<b>Insert:</b>	7.5" x 10" per 2000	\$900.90		

### Reproduction:

#### Digital File – File formats accepted:

Press Quality PDF File - 300 dpi.

Tag Image File Format – TIF 300 dpi.

Encapsulated Postscript – EPS 300 dpi.

*All digital files need to be either grayscale or CMYK.*

Company Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

CC # (V/MC): \_\_\_\_\_ Exp: \_\_\_\_\_

CVV Code: \_\_\_\_\_ Please indicate size of ad desired: \_\_\_\_\_

Month/Months to run: \_\_\_\_\_

This is authorized by: \_\_\_\_\_ Date: \_\_\_\_\_

*(Signature)*

**Please forward this agreement with Check/Visa/MasterCard and digital art files to the WCDDA.**

*(Art files can be emailed to: [kelsey@wcdental.org](mailto:kelsey@wcdental.org))*

All advertising is subject to the approval of the editorial staff. The editorial staff reserves the right to reject any advertising and to edit as deemed appropriate. The editorial staff does not assume liability to content of advertising matter. Additional charges may apply for photos, screens, typesetting and any graphic preparation. Rates effective January 2011 (subject to revision).

*To view samples of past newsletters, please visit: [www.wcdental.org/wcd\\_professionals/newsletters.html](http://www.wcdental.org/wcd_professionals/newsletters.html)*

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# Association E-Newsletter

## E-Newsletter Advertising Information/Contract

**Issuance:** February, March, April, June, July, August, October, November and December (1<sup>st</sup> of the month)  
**Circulation:** Approx. 1500 West Coast Member Dentists  
**Contract Deadlines:** 10 days prior to publish date  
**Cancellation:** Ad cancellations will not be accepted after the contract deadline  
**Advertising Rate:** \$137.50/per month; Company name, logo, advertisement and link to website

Company Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

CC # (V/MC): \_\_\_\_\_ Exp: \_\_\_\_\_

CVV Code: \_\_\_\_\_ Month/Months to run: \_\_\_\_\_

This is authorized by: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature)

**Please forward this agreement with Check/Visa/MasterCard and company logo/web address and/or digital art (jpg file 170px X 225px tall).**

*(Art files can be emailed to: [kelsey@wcdental.org](mailto:kelsey@wcdental.org))*

All advertising is subject to the approval of the editorial staff. The editorial staff reserves the right to reject any advertising and to edit as deemed appropriate. The editorial staff does not assume liability to content of advertising matter. Rates effective January 2011 (subject to revision).

# Annual Meeting



The Annual Winter Meeting is held in the Tampa Bay Area during the month of February. This one-day meeting offers over 20 hours of continuing education and is a great opportunity for the entire dental team to learn/review new techniques, visit local vendors, build relationships and network with colleagues. Our approximate 600 attendees are a combination of dentists, hygienists, assistants and office managers. Several breaks and an extended lunch provides the attendees ample time to visit with our exhibitors.

The exhibitor table top fee is \$900.00 and includes a 6' skirted table, 2 chairs, wastebasket, electricity and an identification sign with company name, city, state and tabletop number. The complete schedule of events, rules and regulations and contract is included on pages 6-8.

# Summer Meeting

The Annual Summer Meeting is held at the beautiful Ritz-Carlton, Naples beach property.

The association offers up to 12 hours of continuing education credits throughout this popular three day meeting which includes: family fun and adult activities, a golf tournament, and plenty of free time to enjoy the beach. Approximately 200 dentists attend with their families and exhibitor tabletops are limited to 19. The table top fee is \$900.00 and exhibitors are welcome to participate in the special events (wine & cheese reception and sporting events). Our half-day format allows exhibitors the opportunity to make lunch and dinner plans with potential clients. Additionally the exhibit hall is connected to the lecture room, increasing exhibitor visibility for our attendees and coffee breaks are implemented for additional exposure.

Contract is available on pg. 9. For a complete brochure of events visit [www.wcdental.org](http://www.wcdental.org).



# Annual Meeting

## Exhibitor Information & Contract

February 15, 2013

Hilton St. Petersburg Bayfront • 333 First Street South • St. Petersburg, FL 33701

### SCHEDULE OF EVENTS & SESSION HOURS

Friday, February 15, 2013

7:00 a.m. – 8:00 a.m.	Exhibitor Set-up
8:00 a.m.	Exhibition Hall & Registration Opens
9:00 a.m. - 5:00 p.m.	Lecture Sessions
11:30 a.m. – 2:00 p.m.	Lunch
Throughout the day	Refreshment Breaks
4:30 p.m.	Business Meeting
5:00 p.m.	Exhibitors Dismantle

Staggered session hours and coffee breaks allow maximum time for visiting the Exhibition Hall.

### CONTRACT AND INFORMATION

Enclosed is a contract to reserve your exhibit space. Please complete and sign the form early to ensure your location request.

Exhibit space will be allocated on a first-come/first-served basis according to the date of receipt of the application and the development of a well-balanced exhibition.

No exhibit may be dismantled before the specified time, nor may any part of the exhibit or equipment be removed, once it has been set up, except with the permission of the Exhibits Chairman, or exhibitor will automatically lose all seniority for prime booth space the following year. The Exhibits Committee reserves the right to recommend withdrawing invitation to exhibit.

### ADVERTISING OPTIONS & PARTNERSHIP OPPORTUNITIES

Enclosed is additional information on how your company can become a partner. Each level offers more exposure and is highly recognized by the association.

For an additional \$50.00 your company can be included in promotional materials. Your company has an opportunity to advertise via a one page insert in the meeting confirmation packets that are mailed to each pre-registered attendee and/or your company name and website link can be included on electronic meeting promotions distributed to dentists.

### RULES AND REGULATIONS

The rules and regulations, which govern exhibitors, are on the reverse side.

Acceptance of an exhibitor and assignment of a booth number will be made by the Exhibits Committee. **Notification will be made to the applicant with the signed contract.**

Total payment must accompany the contract unless other arrangements are made directly with the WCDDA office. It is further understood no money will be refunded within 60 days of the meeting.

Rental cost includes one 6' skirted table, 2 chairs, wastebasket, an identification sign indicating booth number, company name, city and state; and one electrical outlet, **however the exhibitor must place their electrical order at least two weeks in advance.** No exhibit shall exceed its designated area. Internet access and other accessories are the responsibility of the exhibitor and can be ordered through the Hilton St. Petersburg Bayfront.

# Annual Meeting

## Application For Space

### RULES and REGULATIONS – Governing Each Contract for Space

1. **ELIGIBILITY** - Exhibitors participate by invitation only and the Association reserves the right in these selections at all times. The Association reserves the right to (a) reject any application to exhibit products or services for any reason, with or without cause, or to (b) relocate booth assignments, with prior notice to the exhibitor, in order to develop balance against congestion, to avoid confusion in firms' names, to solve competition conditions or similar reasons.

2. **EXHIBITOR'S REPRESENTATIVES** - The executed contract must carry the names of the exhibitor's authorized representatives. **Confirmation of exhibit space will be forwarded to your company's exhibits coordinator.** Nontransferable admission badges will be available to authorized representatives at the onsite registration area. Exhibitors desiring to change representatives must notify the Association in writing.

3. **EQUIPMENT AND SERVICES** – Hilton St. Petersburg Bayfront has been retained by the West Coast District Dental Association as the official service contractor.

**Accessories:** Internet service and electricity should be ordered 2 weeks prior to the meeting date.

#### 4. CONFERENCE SHIPPING AND RECEIVING

The Hotel is not responsible for any arrangements or expenses associated with the shipping of materials, merchandise, exhibits or any other items to and from the Hotel. The Hotel must be notified (3) days in advance, and any consignments shipped to the Hotel should include the following information on the package: Hilton St. Petersburg Bayfront, 333 First Street South, St. Petersburg, Florida 33701, and the hotel's contact, Amy McNeely, Conference Services Manager. "Attention: (onsite contact to collect package), exhibitor's name along with the organization/conference name and arrival date, West Coast District Dental Association Annual Meeting, Feb. 15th. The Hotel charges a \$12.00 handling fee per package (or \$75.00 per palette) for any and all conference materials shipped to the Hotel. Materials will only be received 3 days prior to the event date. The handling fee will cover the following services:

- A. Receiving shipments
- B. Secured storage
- C. Distribution of meeting materials to and from meeting room locations.
- D. Repackaging and shipping (freight charges not included)

5. **LIABILITY AND SECURITY** - It is agreed that exhibitors shall indemnify and save harmless the West Coast District Dental Association and the Tampa Convention Center from all liability which might ensue from any cause whatsoever. The West Coast District Dental Association will not guarantee exhibitors against loss of any kind.

6. **CHARACTER OF EXHIBITS** - Exhibits will be limited to equipment, merchandise or services which would advance the art and science of dentistry by allowing the individual dentist to educate himself/herself on the latest items available so as to allow him/her to practice the best dentistry. They must be of special interest to the dentist, educational or informative with respect to his/her practice. The Committee reserves the right to decline and prohibit any exhibit or any part of a proposed exhibit which, in its opinion is not proper. This reservation concerns persons conduct, printed matter, souvenirs, or any other thing which, in the sole discretion of the Exhibits Committee, may affect the character of the Exhibit. Noise producing exhibits are strictly prohibited.

#### 7. CONDUCT OF EXHIBITS

- a. Exhibits should be so installed that they will not project beyond the space allowed or at a height to be objectionable to adjacent booth or display areas.
- b. No exhibit may exceed eight feet in height. This eight feet in height shall not extend over one-third (1/3) the depth of the booth.
- c. No part of any exhibit or signs relating thereto shall be stapled, pasted or nailed, or otherwise attached to the walls, doors, etc., in any way as to deface the same. **Damage from failure to observe these rules shall be paid by the exhibitor.** The Tampa Convention Center should be consulted as to the proper methods of affixing any item or material to the areas in question.
- d. No canvassing or soliciting for business shall be permitted in the aisles or in other exhibitors' booths. No signs showing prices may be displayed. The taking of orders for future delivery is of course, acceptable. Any other exhibitor shall not infringe upon the rights and privileges of another exhibitor. Interviews, demonstrations, distribution of literature, etc., must be made within the confines of their own booths. Canvassing outside the booth is forbidden. Absolutely no price signs are permitted anywhere.
- e. Samples of approved products, catalogs, pamphlets, publications and souvenirs may be distributed provided it is done in a dignified manner, does not create a nuisance and does not interfere with adjoining exhibits.
- f. No exhibitor shall sponsor any type of contest; conduct any prize drawing, awards for signing of names and addresses, or other extreme promotional stunt without

first obtaining written permission from the Exhibits Committee.

- g. Exhibitors with noisy electrical devices, sound-producing movies or videos, or other devices that prove objectionable to other exhibitors because of noise, odor or other disagreeable features, will not be permitted, or they must agree to accept booth assignments which will not cause objections.
- h. Exhibits requiring use of water, air or flammable material to operate are not acceptable unless these items are self contained and approved by the Tampa Convention Center management.
- i. Advertising material or signs of firms other than those who have engaged space are prohibited.
- j. Canvassing, solicitation of business or conferences in the interest of business except by exhibiting firms is prohibited.
- k. Unethical conduct or infraction of rules on the part of any exhibitor or his representatives or both will subject the exhibitor or his representatives to dismissal from the Exhibit Hall, in which cases, it is agreed that no refund shall be made by the West Coast District Dental Association, and further, that no demand for redress will be made by the exhibitor or his representative.
- l. No exhibitor will assign, sublet, or apportion the whole or any part of the space allowed therein to permit any other party to exhibit therein any goods other than those manufactured or handled by the contracting exhibitor in the regular course of his business, nor permit any representative of any firm or company not exhibiting to solicit business or take orders in his space.
- m. The West Coast District Dental Association reserves the right to relocate booth assignments in order to develop a compact, well-knit show, if necessary.
- n. All packing containers, excelsior and similar material are to be removed from the exhibition area upon completion of the booth arrangement.
- o. No exhibit may be dismantled before the specified time, nor may any part of the exhibit or equipment be removed, once it has been set up, except with the permission of the Exhibits Chairman, or exhibitor will automatically lose all seniority for prime booth space the following year. The Exhibits Committee reserves the right to recommend withdrawing invitation to exhibit.

8. **CANCELLATION OR REDUCTION OF SPACE** - Cancellation or reduction of booth space must be made in writing to the Exhibits Committee and postmarked on or before November 26, 2012 (60 business days before meeting) to receive a full refund. If the request is post marked after November 26, 2012, the WCDDA shall retain 100% of the rental fee; provided that if the Association resells the canceled or reduced space, the West Coast District Dental Association shall refund the full amount less an administrative charge not to exceed 20% of the total booth rental fee.

9. **CANCELLATION OF EXHIBITION** - In the event that the exhibition must be canceled, postponed or relocated on account of fire, strike, government regulations, casualties, act of god, or other causes beyond the reasonable control of the West Coast District Dental Association, the exhibitor waives any and all damages and claim for damages, and agrees that the sole liability of the Association will be to return to each exhibitor the exhibitor's rental payment.

10. **EXHIBITOR REPRESENTATIONS** - The exhibitor warrants that it has duly registered in accordance with Florida law with the Florida Department of Revenue in the event that it sells non-exempt tangible personal property. The exhibitor further warrants that products or services to be exhibited have not been proven unsafe or ineffective by the appropriate council of the American Dental Association or the Food and Drug Administration and that the product or service is safe and effective.

11. **DEPARTMENT OF REVENUE REGISTRATION** - Exhibitors who sell non-exempt tangible personal property must register with the Florida Department of Revenue. It is the responsibility of each individual exhibitor to determine if they must register with the department. The Taxpayer Assistance Section of the department should be contacted at (800) 352-3671. Applications for registration are available, without cost, by writing to the Florida Department of Revenue, Supply Section, Tallahassee, FL 32399-0100.

12. **AMENDMENT TO RULES:** Any and all matter or questions not specifically covered by the preceding rules and regulations shall be subject to the decision of the Exhibits Committee and the West Coast District Dental Association.

**The foregoing regulations have been formulated in the best interest of all exhibitors. The cooperation of exhibitors is requested.**

# Annual Meeting

## 2013 Exhibitor Contract

### WEST COAST DISTRICT DENTAL ASSOCIATION Annual Meeting ❖ February 15, 2013 ❖ Hilton St. Petersburg Bayfront

Exhibitor's Firm Name \_\_\_\_\_ Federal ID# \_\_\_\_\_  
Address \_\_\_\_\_ Email \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Authorized by (name and title) \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Signature of applicant: \_\_\_\_\_ Date \_\_\_\_\_

If you would like for your company website link to appear on the WCDDA website please print below:

Company Website \_\_\_\_\_ Our company is a subsidiary of \_\_\_\_\_

General description of the equipment, supplies, and processes or services to be featured: \_\_\_\_\_

Booth Number (s): 1st Preference: \_\_\_\_\_ 2nd Preference: \_\_\_\_\_ 3rd Preference: \_\_\_\_\_

Firms we prefer not to be located near or next to \_\_\_\_\_

Accessories needed for exhibit area (Check all that apply):  Electricity  Internet

Contact Person for Advertising: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact Person for Exhibits: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact Person for Sponsorship: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Exhibit Space: \$900.00

Advertising Options:  My company wants to provide a promotional piece to be included in preregistration confirmation packets for \$50.00  
 Include company name and link on promotional email blast to entire WCDDA membership for \$50.00 **TOTAL** \_\_\_\_\_

Payment Method:  Check: *made payable to WCDDA*  
 Credit Card Credit Card No. \_\_\_\_\_

Exp. Date: \_\_\_\_\_ CVV Code: \_\_\_\_\_ Signature: \_\_\_\_\_

#### Booth identification sign, (Please print):

(Two lines of lettering only)

(Company name) \_\_\_\_\_

(City, State) \_\_\_\_\_

#### Names to appear on badges: (Please print)

Designated by contact person

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Exhibit space will be allocated on a first-come/first-served basis according to the date on which the signed contract is received by the association. Whenever possible, space will be allocated according to the exhibitor's choice, but the final arrangement will be determined by the Exhibits Committee in such a way as to produce the most advantageous grouping of exhibits. Exhibitor participation is subject to the Rules and Regulations on page 7.

We also agree to pay \$ \_\_\_\_\_ (in U.S. dollars) representing the total rental cost of the exhibit space in order to guarantee its availability. It is further understood no money will be refunded within 60 days of the meeting. **A copy of this contract, authorized by a WCDDA representative, will be returned to you upon acceptance, as official confirmation of assigned exhibit space.**

(Office Use Only) Accepted by the West Coast District Dental Association
Date
Amount
Booth(s) assigned
Signature

Completed contract can be mailed or faxed to:

**WEST COAST DISTRICT DENTAL ASSOCIATION**  
1114 Kyle Wood Lane • Brandon, Florida 33511  
(813) 654-2500 • FAX (813) 654-2505  
Website: [wcdental.org](http://wcdental.org) • e-mail: [lissette@wcdental.org](mailto:lissette@wcdental.org)  
Hours: M-F 8:00 a.m. - 5:00 p.m.



# Partnership Contract

## Application/Contract for Partnership Opportunities

### WEST COAST DISTRICT DENTAL ASSOCIATION

Type or clearly print on this application. The company name, address, city and state as shown on this form will appear on signs, programs and brochures.

Company Name: \_\_\_\_\_ Date: \_\_\_\_\_

Our company is a subsidiary of/Parent Company: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Website Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Partnership Opportunities please check one:

\$5,400 Platinum Partner

\$3,600 Gold Partner

\$2,000 Silver Partner

Contact Person for Advertising: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Contact Person for Exhibits: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Contact Person for Sponsorship: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Description of services, equipment, supplies and/or products company promotes/endorse: \_\_\_\_\_

All companies applying for partnership opportunities must complete and submit an Application/Contract for Partnership Opportunities. The West Coast District Dental Association will not accept applications that are not properly completed with signature, deposit and contact names. Payment can be made by check or credit card. Only Visa or MasterCard credit cards are accepted.

At this time, we agree to pay \$ \_\_\_\_\_ (in U.S. dollars), representing the total cost for Partnership Opportunities requested. It is further understood no money will be refunded only credit towards other West Coast events and services will be given.

We have read and agree to abide by all provisions, terms and conditions, which the undersigned applicant agrees is part of this contract for partnership opportunities.

\_\_\_\_\_  
Print Name of Applicant

\_\_\_\_\_  
Title

\_\_\_\_\_  
Authorized Applicant Signature

\_\_\_\_\_  
Date

**Payment**  Check: made payable to WCDDA

**Method:**  Credit Card Credit Card No. \_\_\_\_\_

Exp. Date: \_\_\_\_\_ CVV Code: \_\_\_\_\_ Signature: \_\_\_\_\_

(Office Use Only) Accepted by the West Coast District Dental Association
Date
Amount
Partnership Category
Signature

Signature: **Return with your payment to:**  
Lissette Zuknick, Executive Director - [lissette@wcdental.org](mailto:lissette@wcdental.org)  
WEST COAST DISTRICT DENTAL ASSOCIATION  
1114 Kyle Wood Lane • Brandon, Florida 33511  
(813) 654-2500 Fax (813) 654-2505  
Hours: M-F 8:00 a.m. - 5:00 p.m.