



North Carolina
DENTAL HYGIENISTS'
ASSOCIATION



6th Annual Session | Sept. 13 – 14, 2024
Embassy Suites by Hilton Raleigh-Durham/Research Triangle
201 Harrison Oaks Boulevard | Cary, NC 27513
NEW LOCATION!

Exhibitor Prospectus

A SINCERE INVITATION

We invite your company to participate in the
North Carolina Dental Hygienists' Association 6th Annual Session!



MEETING LOCATION Embassy Suites Hilton Raleigh-Durham/Research Triangle
201 Harrison Oaks Boulevard
Cary, NC 27513

HOTEL RESERVATIONS

Embassy Suites by Hilton Raleigh-Durham/Research Triangle
201 Harrison Oaks Boulevard | Cary N.C. 27513

Phone: 1-800-EMBASSY | **Group Name:** NCDHA Annual Session | **Group Code:** 92Y
Reservations must be made using the above group name and prior to **August 13, 2024** in order to receive the group rate of \$179 plus applicable tax. Guests will enjoy You may also make reservations by going to the website www.ncdha.org and click on the About tab, News tab, view tab under Annual Session 2024 wording, scroll down and click on the registration button. The Hotel may require a deposit equal to the room rate and tax for the first night for each reservation. Deposit is refundable only in accordance with the Hotel's standard guest cancellation policy which will be listed on your reservation email when you make the reservations. This is a non-smoking facility.

Embassy hotel guests enjoy the following amenities:

- Two-room suites
- Complimentary full cooked to order breakfast served daily
- Evening Reception served complimentary daily
- Complimentary 24-hour airport shuttle

PARKING

There will be a charge of \$5.00 for guests' overnight self-parking; and an hourly charge for attendees who are not staying at the hotel of \$2.00 for the first half hour, \$1.00 each half hour thereafter and a maximum charge of \$10.00 per day. This fee is separate from the hotel reservation fee.

AIRPORT

Closest airport is Raleigh/Durham (RDU)

GROUND TRANSPORTATION

Many options for ground transportation (taxi, rental cars, etc.) at RDU. If you are a guest of the Embassy Suites Hilton Raleigh-Durham /Research Triangle, call the hotel for a shuttle pick up. 919-677-1840.

MEETING CONTACT

Please direct all show inquiries to:
NCDHA Annual Session
PO Box 206 | Elkin NC 28621
P: (336) 975-0029 | F: (336) 975-0033 | josh@cmai.pro

MARKETING

The targeted audience for the meeting is dental hygiene professionals, educators, students, and the entire dental team. Registration information will soon be added to the website and emailed to all members and non-members in the state. **We need your help!** Let your customers know you will be there.

EXHIBIT HOURS

Friday, Sept. 13 | 10:30AM-2:00PM & 4:00-7:00PM
Saturday, Sept. 14 | 10:30 AM - 2:00 PM

EXHIBITS SET-UP

Friday, Sept. 13 | 8:00 AM - 10:30 AM

EXHIBITS TEAR-DOWN

Saturday, Sept. 14 | Begins 2:00 PM and must be finalized by 6:00 PM.

TABLE PACKAGES & FEES

Standard Table rate: \$600; Recruitment only Table rate: \$400 (includes all higher education or temp agencies); Non-Profit Table rate: \$200; Student Fundraising table rate: \$50 per table, (max of 2) for \$100 (more options on sponsorship form)

Checks should be made payable to NC Dental Hygienists' Association (NCDHA)
TAX ID#: 56-0946458

Table fee includes (1) 6' x 30" table. Lunch tickets that are not included in sponsorships may be purchased for Friday and/or Saturday for a fee of \$45 per ticket. (onsite lunches cannot be guaranteed). Side panels of displays must not exceed 8' high or more than 4' from the back so as not to block adjoining displays.

One basic electric is \$100 for the event (includes tax and must order through the NCDHA office-see registration form.). Wi-fi is \$20 per device per day (includes tax and must order through the NCDHA office-see reg form.). Please order and pay on the registration form. Call the NCDHA office if you have audio visual needs. **Full payment must accompany registration form for table space to be held.** For your convenience, we accept Discover, MasterCard, Visa, and American Express payments.

TABLE REPRESENTATIVES

All persons in your exhibit space must be employees or official exhibit representatives for your company. Name badges will be prepared based on information received from your company listed on the tradeshow agreement and are required for entry into the exhibit area. **These badges may not be shared with customers.** Please review your table representatives list two weeks prior to the show for changes and/or edits if needed.

TOOTH TROT

Register to participate in the second annual Tooth Trot Saturday morning 7:00AM (meet in the hotel lobby). \$10 to participate-No t-shirt \$30 to participate with t-shirt. A portion of the proceeds of this event will be donated to Smile Train. (See registration form)

SPONSORSHIPS

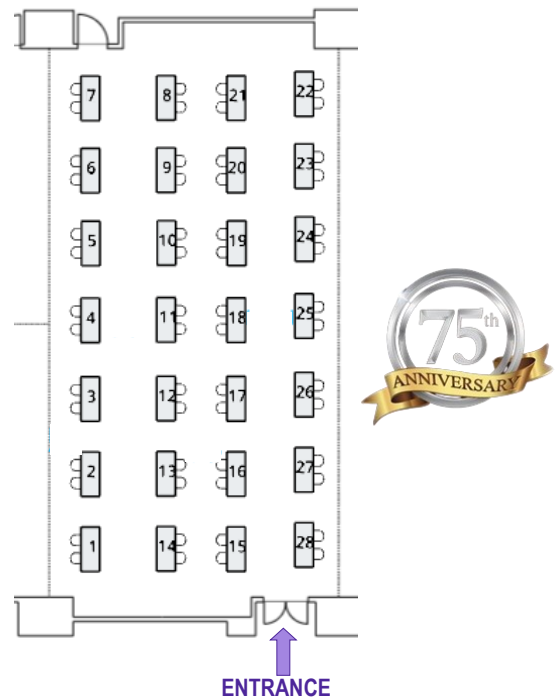
Sponsorship of a social event, speaker, etc. is greatly appreciated. This is a great opportunity for your company to market to the entire group or to a targeted audience. To register for sponsorships, see enclosed form. For additional information regarding sponsorships, please call the NCDHA office. Make your commitment early so we may include this important information in our printed materials.

DOOR PRIZES INCREASE YOUR EXPOSURE AND CREATE EXCITEMENT!

Exhibitors that offer door prizes for attendees create additional excitement and increase visibility for their company. Please indicate your door prize(s) on your trade show contract or see the NCDHA registration desk for a form. With your permission, we may use door prize(s) for the Silent Auction or the Mini Raffle. (See registration form.)

Firms and representatives of firms not assigned exhibit space are prohibited from soliciting business during the Annual Session. Violators will be requested to promptly leave the exhibit area.

TENTATIVE EXHIBITOR FLOOR PLAN FOR TABLE TOP EXHIBITS



CONTRACT FOR SPACE: The application for exhibit space, the formal notice of space assignment and these Rules & Regulations and the regulations as set forth in the Exhibitor Information package, constitute a contract for the right to exhibit at the NCDHA Annual Session. Exhibitor also agrees to comply with the rules and regulations of the Embassy Suites by Hilton Raleigh-Durham/Research Triangle Cary, NC, and/or any other contractors for this event.

RIGHT OF REFUSAL & CANCELLATIONS: Annual Session Committee (NCDHA) reserves the right to cancel this agreement when and if it discovers that the exhibitor's product or service is not as described in this agreement or is incompatible with the purposes of the Annual Session. Contract may be cancelled if the exhibitor's demeanor is deemed inappropriate or disruptive by show management and/or NCDHA.

TAXES, LICENSES & PERMITS: The exhibitor shall be responsible for obtaining any permits, licenses or approvals required by local or state law applicable to their activities at the show. The exhibitor is responsible for obtaining tax identification numbers and payments of all taxes and other fees that shall be due to any governmental agency in connection with their activity at the meeting.

TABLE ASSIGNMENTS & TABLE SHARING: Table assignments begin on July 10, 2024 & should be confirmed by August 9, 2024. Table assignments are handled in a point system priority order. This would be based on the number of years that an exhibitor has participated (in the last 4 years), the number of tables reserved each year, sponsorship, and early registration for the current year. New exhibitor applications are processed in the order that they are received. Exhibitors MAY NOT reassign, sublease or share assigned space or fraction thereof, with any person, firm or entity without written notification to and written approval from NCDHA. Table sharing, as a general rule, is prohibited, without prior approval. If you are the distributor for a manufacturer, ONE representative from the manufacturing company at your table will not be considered Table sharing. Exhibit Manager reserves the right to alter the location of exhibits as shown on the original floor plan if it deems advisable and in the best interest of the show. Firms and their representatives that are not assigned exhibit space are prohibited from soliciting business in any form in the exhibition and meeting areas. Violators will be promptly removed and may not be allowed to participate in future events.

EXHIBIT LIMITATIONS: Exhibits may not project beyond the space allotted and aisles must be kept clear for traffic. Exhibits may not obstruct the view or interfere with accessibility or traffic to other exhibits. Exhibits must be constructed and operated in compliance with Rules & Regulations as developed throughout this docuDRAFT and its attachments and amendments. Exhibitors are expected to conduct business within their table(s) and not in the aisles.

SOUND: Any method to project sound beyond the confines of the exhibit table area is prohibited. NCDHA reserves the right to determine at what point sound constitutes an interference with others and must be discontinued or modified.

FIRE, SAFETY & HEALTH REGULATIONS: The exhibitor agrees to accept full responsibility for compliance with city, county, state and federal Fire, Safety and Health Regulations regarding the installation and operation of equipment. All exhibit materials and equipment must be reasonably located within the table area and protected by safety guards and devices where necessary to prevent accidents to attendees. The exhibitor further represents to NCDHA that the exhibitor has taken all steps reasonably necessary to ensure the sound engineering and structural integrity of its exhibit design and proper construction and safety of the exhibit itself, as erected.

INSURANCE: General comprehensive, liability and workers compensation insurance must be obtained by exhibitors at their own expense for a minimum of \$2,000,000 listing Annual Session c/o NC Dental Hygienists' Association • PO Box 206 • Elkin, NC 28621 and Embassy Suites by Hilton Raleigh-Durham/Research Triangle • 201 Harrison Oaks Boulevard • Cary, NC 27513 as additional insureds. Proof of insurance must be submitted to NCDHA upon request.

UNOCCUPIED SPACE: NCDHA reserves the right, should any rented exhibitor's space remain unoccupied two (2) hours prior to the published opening time of the show, or should any space be forfeited due to failure to make payment in full, to sell paid or unpaid space to another exhibitor, to use space for such purpose as it may see fit without liability on its part. This clause shall not be interpreted as affecting the obligation of the exhibitor to pay the full amount specified in the trade show contract. Failure to make payment of the full amount specified for exhibit space by the cut off date constitutes cancellation by the exhibitor.

EARLY BREAKDOWN: Exhibitors agree to remain on the exhibit hall floor until the official close of the trade show as published. **Dismantling must be completed by 6:00 PM.** If you will require additional time to pack your exhibit materials, please ask the NCDHA office.

CANCELLATIONS, REFUNDS, & LIABILITY: Cancellation by the Exhibitor: Cancellations must be received in writing. Cancellations received before **June 28, 2024** shall be entitled to receive a full refund less a \$150 administrative fee. **No refunds will be made after June 28, 2024** unless the paid-in-full space is resold prior to **Sept 2, 2024** and entire show floor is sold out. If NCDHA resells the space as outlined, the exhibitor is entitled to full refund less a \$150 administrative fee within 30 days following the end of the show. **Cancellation by show management:** The amount of the refund, if any, will be determined by NCDHA within 30 days following the close of the show. **No Show = No Refund**

DEFAULT BY EXHIBITOR: The exhibitor shall be in default if it fails to pay the required fees by the scheduled date under this agreement or breaches any of the provisions of this contract.

HOLD HARMLESS: The exhibitor will indemnify, defend, and hold harmless NCDHA and its sponsor, the city of Cary, NC the Embassy Suites by Hilton Raleigh-Durham/Research Triangle and their respective owners, directors, officers, employees, agents and representatives, against all claims, actions, demands, or liability of whatsoever kind and nature, including but not limited to judgments, interest, reasonable attorneys' fees, expert witness fees, and all other related costs and charges arising out of exhibitor's activities related to the exhibition or any breach of the exhibitor Rules and Regulations, claims of property or personal injury caused by or attributed in part or in whole to any action or failure to act whether by negligence or otherwise, on the part of the exhibitor or any of its directors, officers, employees, agents, representatives or contractors, excluding liability caused by the sole negligence or willful misconduct of NCDHA, its sponsor and their respective owners, directors, officers, employees, representatives and agents.

LIMITATION OF LIABILITY: The exhibitor assumes the entire responsibility and liability for all damages or losses to NCDHA, the facility, persons or property that occur as a result of the negligence or any actions of the exhibitor or its officers, employees, agents representatives, invitees and guests during the entire exhibition period. The exhibitor agrees that, to the maximum extent permitted by law, NCDHA, the city of Cary, NC the Embassy Suites by Hilton Raleigh-Durham/Research Triangle, and any of their respective officers, agents, employees or representatives will not be held liable for any loss or damage to any exhibits or materials, goods or wares (collectively "property") belonging to the exhibitor, and they are released from liability for any damage, loss or injury to person or property of the exhibitor or its officers, employees, agents representatives, invitees and guests, resulting from fire, storms, water, acts of God, air conditioning or heating failure, theft, mysterious disappearance, bomb threats or any other causes.

ATTORNEY FEES & COSTS: Should any litigation arise out of this contract, the exhibitor shall pay all costs and reasonable attorneys' fees incurred by NCDHA and/or its sponsors of Annual Session and/or its sponsors are the prevailing parties. This provision shall extend to the cost and attorneys' fees incurred both at the trial and appellate level.

EXCUSED NON PERFORMANCE & FORCE MAJEURE: If, for any reason beyond the reasonable control of NCDHA, including but not limited to acts of God, governmental restrictions or regulations on travel (including travel advisory warnings), war, strikes, labor disputes, accidents, government requisitions, facility availability, commodities or supplies, inability to secure sufficient labor, civil disturbance, terrorism or threats of terrorism as substantiated by governmental warnings or advisory notices, curtailment of transportation, disaster, fire, earthquakes, hurricanes, extreme inclement weather, epidemics, shortages or disruption of the electrical power supply causing blackouts or rolling blackouts (in the city where the facility is located), or any other comparable conditions, NCDHA is unable to fulfill its obligations under this agreement, the parties may terminate this agreement without liability and NCDHA may retain the earned portion of the exhibitor registration fee required to recompense it for expenses incurred up to the time of termination of the event. Any remaining unearned exhibit fees will be returned to the exhibitor.

Additionally, if any part of the facility is damaged or if circumstances beyond NCDHA reasonable control make it impossible or impractical for NCDHA to occupy or continue to occupy the assigned exhibit space location during any part of the entire event, the exhibitor will only be charged a pro rata exhibit space rental fee for the period that the exhibit space was or could have been occupied by the exhibitor. Furthermore, in no event will NCDHA, the city, the facility or their respective owners, directors, officers, employees, agents and representatives be liable for any consequential, indirect, special or incidental damages of any nature or for any reason whatsoever.

AUTHORITY TO SIGN: The exhibitor agrees that they have the authority to enter into this agreement and bind the company or party for whom they sign, and abide and be bound by all of the terms and conditions, exhibitor rules and regulations stated in this entire agreement or any amendments to the aforementioned. All points not covered herein are subject to the decision of NCDHA.

The exhibitor further agrees that NCDHA will have full power in matters of interpretation, amendment, and enforcement of all exhibitor rules and regulations. In all instances, the decision of Annual Session Committee of NCDHA shall be final. All rights and privileges granted to the exhibitor under this agreement and any subsequent amendments are subject to and subordinate to the master agreement between NCDHA, its sponsors and the facility.



SPONSORSHIP OPPORTUNITIES

Deadline: **June 28, 2024** (to be included in meeting registration materials)



Sponsorships are offered on a first-come, first-served basis and are recognized in the following categories:

Additional sponsorships may be available. Please call the NCDHA office to discuss additional options.

ORAL HEALTH AMBASSADOR SPONSORSHIP: \$4,500+

- Sole Happy Hour sponsor
- Sole Lanyard sponsor
- Exhibit table for Friday and Saturday
- Up to two (2) complimentary lunch tickets for Friday and Saturday
- Distribution of promotional materials in tote bags at registration (supplied by sponsor)
- Logo on pre-conference marketing, conference signage
- Logo on website for 90 days post event
- Access to attendee list (post meeting)
- Only 1 opportunity available!

ORAL HEALTH PATRON SPONSORSHIP: \$3,500

- Single day sole lunch sponsor (can choose Friday or Saturday)
- 15 minutes to address attendees during sponsored lunch
- Exhibit table for Friday and Saturday
- Up to two (2) complimentary lunch tickets for Friday OR Saturday
- Distribution of promotional materials in tote bags at registration (supplied by sponsor)
- Logo on pre-conference marketing, conference signage
- Logo on website for 60 days post event
- Access to attendee list (post meeting)
- Only 2 opportunities available!

ORAL HEALTH CHAMPION SPONSORSHIP: \$2,500

- Half day break sponsor (can choose Friday or Saturday - am or pm)
- Tote Bag Sponsorship (to be shared over all champion level sponsors)
- Exhibit table for Friday and Saturday
- Up to two (2) complimentary lunch tickets for Friday OR Saturday
- Distribution of promotional materials in tote bags at registration (supplied by sponsor)
- Logo on pre-conference marketing, conference signage
- Logo on website for 30 days post event
- Access to attendee list (post meeting)
- Only 4 opportunities available!

ORAL HEALTH ADVOCATE SPONSORSHIP: \$1,500

- Tooth Trot Sponsorship (shared over all advocate level sponsors)
 - Includes full color logo on shirt and Tooth Trot promo materials
- Exhibit table for Friday and Saturday
- Up to two (2) complimentary lunch tickets for Friday OR Saturday
- Distribution of promotional materials in tote bags at registration (supplied by sponsor)
- Logo on pre-conference marketing, conference signage
- Logo on website for 14 days post event
- Access to attendee list (post meeting)
- Unlimited opportunities available!

ORAL HEALTH CRUSADER SPONSORSHIP: \$850

- Exhibit table for Friday and Saturday
- Up to two (2) complimentary lunch tickets for Friday OR Saturday
- Distribution of promotional materials in tote bags at registration (supplied by sponsor)
- Logo on pre-conference marketing, conference signage
- Logo on website for 7 days post event
- Access to attendee list (post meeting)
- Unlimited opportunities available!

TOOTH TROT SPONSORSHIP: \$50

(In addition to the Oral Health Advocate Sponsorship we are offering an additional opportunity to support the Tooth Trot)

- Company or individual listing on the back of the T-shirt (text only)
- Unlimited opportunities available!

SAVE THE DATE FOR 2025
SEPTEMBER 12-13, 2025 | SAME LOCATION
LOCK IN YOUR RATE FOR 2025 AT 2024 RATES WITH EARLY REGISTRATION.
PLEASE VISIT THE REGISTRATION DESK AT ANNUAL SESSION FOR MORE INFORMATION

Company: _____ Contact: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Event Desired: 1st choice: _____ 2nd choice: _____

Subtotal for Sponsorships \$ _____

Would you like to donate 3% of the total to cover credit card processing fees? ___ Yes ___ No \$ _____

Total for all registrations: \$ _____

PAYMENT INFORMATION

Check (made payable to NCDHA) Visa MasterCard Discover AmEx **Amount Authorized: \$** _____

Card Number: _____ Exp. Date: ____/____/____ CVV2: _____ (required)

Cardholder's Name: _____ Signature: _____

Billing Address: _____ Zip: _____

PLEASE RETURN COMPLETED FORM TO:

NCDHA Annual Session (NCDHA) | PO Box 206 | Elkin, NC 28621 | P: (336) 975-0029 | F: (336) 975-0033 | josh@cmai.pro



WHO EXHIBITS AT ANNUAL SESSION?

3M Oral Care
Acidental Inc.
Advanced Dental Associates, Inc.
Agape Dental Ministry
Air Techniques
Aspen Dental
Baylab USA
Bleeding Disorders Foundation of NC
BURST Oral Care
Camellix, LLC
Cloud Dentistry
Colgate Oral Pharmaceuticals
Connect Dental Pros
Crosstex
Dental Dynamic Staffing, LLC
Dental Hygiene Academy
Dental Tease
Dentsply Sirona
Designs for Vision, Inc.
Diversified Dental Staffing, Inc.
Edward Jones-Bryan Piccirillo
Elevate Oral Care
Family Dental Health
Forward Science
Glaxosmith Kline
Guardian Dentistry Partners
Haleon
Heartland Dental
Hemophilia of North Carolina

Henry Schein Dental
Hu-Friedy
Jack's Dental Depot, Inc.
Kavo Kerr
Light Wave Dental Management LLC
LunaLiteDentVet
MediLoupes
Medi Lazer
NC Dental U
NC Department of Health & Human Services
Orascoptic
Pacific Dental Services
Pulpdent Corporation
PDT Inc./Paradise Dental Technologies
Philip Sonicare & Zoom Whitening
Proctor & Gambill + Crest Oral B
Q Optics
SheerVision Loupes & Headlamps
Student RDH/Professor RDH
Sunstar Americas Inc.
SurgiTel
The Dentist's Choice
The Hygienist Helper, LLC
Think Tech Advisors
Ultradent Products
VOCO America
Waterpik
Young Innovations

SAVE THE DATE FOR 2025
NCDHA 7TH ANNUAL SESSION
SEPTEMBER 12-13, 2025 | SAME LOCATION
LOCK IN YOUR RATE FOR 2025 AT 2024 RATES
WITH EARLY REGISTRATION.
PLEASE VISIT THE REGISTRATION DESK AT
ANNUAL SESSION FOR MORE INFORMATION

EXHIBITOR BENEFITS

- Outstanding keynote speakers to help build great attendance!
- We want you to enjoy your time with us at the meeting this year. Opportunities include: purchase lunch tickets, participate in the Tooth Trot, provide door prizes that can be donated to the Mini Raffle and/or the Silent Auction, dedicated exhibit hours.
- Help us celebrate our 75th Anniversary!!
- Complimentary list of pre-registrations upon arrival.
- Sponsorship opportunities that allow for exclusive benefits!

TRADE SHOW AGREEMENT

Deadline: **June 28, 2024** (to be included in meeting registration materials)
Please complete both pages of this form.



Our company hereby contracts to participate as an exhibitor in the 6th NCDHA Annual Session to be held at the Embassy Suites by Hilton Raleigh-Durham/Research Triangle in Cary, NC on September 13-14, 2024.

Table assignments are handled in a point system priority order. This would be based on the number of years that an exhibitor has participated (in the last 4 years), the number of tables reserved each year, sponsorship, and early registration for the current year.

LIMITED SPACE AVAILABLE RESERVE YOUR SPACE NOW!

Standard Table rate: \$600

Recruitment Only Table rate: \$400

(Includes all higher education or temp agencies)



Non-Profit Table rate: \$200

Student Fundraising Table rate: \$50

(Max of 2 tables for \$100)

[Scan here to register online!](#)

Full cost of table must accompany application. If mailing a check, the check must be received within 10 business days of the application to hold the table. All information must be completed and signature (below) is required.

Name of Company: _____

Address: _____

City, State, Zip: _____

Phone: _____ Fax: _____

Contact Person: _____

(All correspondence for this meeting will be routed to this contact person.)

Contact E-mail: _____ Contact phone: _____

Signed: _____ (required)

By signing this agreement, we agree to abide by all requirements, regulations and obligations mentioned in this prospectus, a copy of which we acknowledge having received.

TABLE REPRESENTATIVES

Table sharing is not permitted unless approved by NCDHA. If you are the distributor for a manufacturer, one (1) representative from the manufacturing company at your table will not be considered table sharing. Annual Session Committee reserves the right to refuse contract if it does not fit with purpose of the meeting. Please list the names of persons representing your company by staffing your exhibit space during the trade show. Exhibitors may not register dentists, DA's, RDH's or other individuals as exhibitors unless they are employed by or are representing your company for the sole purpose of staffing your table. Only registered exhibitors are allowed in the exhibit hall or in the general area of the Annual Session meeting. Violators of this policy will be dismissed from the meeting and not allowed to participate in future meetings.

Rep 1 Name: _____ Email: _____

Trade show contact (responsible for exhibit table)

Cell #: _____

Rep 2 Name: _____ Email: _____

Cell #: _____



Rep 3 Name: _____ Email: _____

Cell #: _____

COMPETITORS We prefer not to be located near the following competitors:

DOOR PRIZE(S) List any door prizes to be awarded during exhibit hours on Friday or Saturday or if you prefer to donate them please check below

Friday Prizes: _____

Saturday Prizes: _____

Please donate my door prizes to the Mini Raffle

Please donate my door prizes to the Silent Auction

OPTIONAL ITEMS:

TOOTH TROT Please register below to run/walk in the Second Annual Tooth Trot - 5K run/walk - Saturday morning 7:00am meet in hotel lobby

Name 1: _____ **Mobile:** _____

\$10 T-shirt not included. \$30 T-shirt included. Size needed _____

Name 2: _____ **Mobile:** _____

\$10 T-shirt not included. \$30 T-shirt included. Size needed _____ **Total Amount: \$** _____

ADDITIONAL LUNCH TICKET(S) Up to (2) lunch tickets may be available complimentary to sponsors (see sponsorship form).

To order lunches not included with sponsorship, cost is \$45 per ticket. (May not be available onsite due to limited/guaranteed seating.)

Add'l Friday Lunch ticket(s): # _____ @ \$45 per ticket Add'l Saturday Lunch ticket(s): # _____ @ \$45 per ticket **Total Amount: \$** _____

Wi-Fi \$20 per device per day. _____ # devices _____ # days **Total Amount: \$** _____

One Standard Electric \$100 for the event (includes tax). **Total Amount: \$** _____

Half the Pot Raffle Tickets _____ # of books **Total Amount: \$** _____

Name for tickets: _____ **Phone:** _____

a book of 6 tickets for \$5 (help us grow the pot early, also for sale on site)

Mini Raffle Tickets _____ # of books **Total Amount: \$** _____

a book of 6 tickets for \$5 (receive your tickets in your attendee packet to place in raffles)

Name for tickets: _____ **Phone:** _____

Subtotal for all registrations \$ _____

Would you like to donate 3% of the total to cover credit card processing fees? ____ Yes ____ No \$ _____

Total for all registrations: \$ _____

PLEASE SEND DIGITAL LOGO IN JPG FORMAT WITHIN 10 BUSINESS DAYS OF SUBMITTING REGISTRATION TO BE SHARED IN MEETING MARKETING MATERIALS

CANCELLATIONS, REFUNDS, & LIABILITY: Cancellation by the Exhibitor: Cancellations must be received in writing. Cancellations **received** before **June 28, 2024** shall be entitled to receive a full refund less a \$150 administrative fee. **No refunds will be made after June 28, 2024** unless the paid-in-full space is resold prior to **Sept 3, 2024** and entire show floor is sold out. If NCDHA resells the space as outlined, the exhibitor is entitled to full refund less a \$150 administrative fee within 30 days following the end of the show. **Cancellation by show management:** The amount of the refund, if any, will be determined by NCDHA within 30 days following the close of the show.

No Show = No Refund

PAYMENT INFORMATION

Check (made payable to NCDHA) Visa MasterCard Discover AmEx **Amount Authorized: \$** _____

Card Number: _____ Exp. Date: ____/____/____ CVV2: _____ (required)

Company Name: _____

Cardholder's Name: _____ Signature: _____

Billing Address: _____

LOCAL REPRESENTATIVES

We will use this information to send promotional materials to local representatives for your company prior to the annual meeting. Thank you for cooperation!

Company Name: _____

Name: _____

Address: _____

Phone: _____

Cell: _____

Email: _____

Name: _____

Address: _____

Phone: _____

Cell: _____

Email: _____

Name: _____

Address: _____

Phone: _____

Cell: _____

Email: _____

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Cell: _____

Email: _____

Name: _____

Address: _____

Phone: _____

Cell: _____

Email: _____

PLEASE RETURN COMPLETED FORM TO:

NCDHA

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