# **APPLICATION AND CONTRACT FOR EXHIBIT SPACE**

Return fully completed application/contract with your deposit by Jan. 9, 2026, for the point system to apply. Booth requests made after Jan. 9 will be assigned on a first-come, first-served basis. A signed application/contract with a \$5,418 non-refundable deposit or full payment will be required for booth assignment. Exhibitor will be invoiced for any balance due. Exhibiting companies that submit applications and contracts after July 11 will not appear in the Final Program. A signature is required to complete the contract.

Application Deadline: Sept. 7, 2026.

#### Payment Schedule

Booths selected from Space Draw to June 13, 2026:

- A \$5,418 non-refundable deposit is due during space assignment appointment, and exhibitor agrees to be liable for the full balance of the booth upon payment of deposit.
- Full payment is due 30 days from booth assignment. Unpaid booths after 30 days will be canceled.

Booths selected from June 13 to Sept. 7, 2026:

Full payment is due immediately upon assignment, and exhibitor agrees to be liable for the full balance of the booth within 30 days upon payment of deposit. AAOMS accepts American Express, Discover, MasterCard and Visa as well as company checks in U.S. dollars.

### Cancellations and Refunds

- All cancellations must be made in writing.
- A full refund will be made for space canceled before May 11, 2026, minus the non-refundable deposit.
- A 50 percent refund, minus the non-refundable deposit, will be provided if space is canceled on or before June 13, 2026. No refunds will be permitted for space canceled after June 13, 2026.
- Booth space will be released if not paid in full within 30 days of invoicing.



#### • Compliant Liability Insurance

Due to exhibitor requests, AAOMS is now including compliant liability insurance with your booth fee. This insurance will meet AAOMS requirements. You will no longer need to go through the hassles and costs of obtaining and submitting your own compliant insurance. AAOMS wants to make exhibiting with the Association as easy as possible.

☐ Crieck fiere ii you ai	re a new exhibiting company.	•		B) In-person Booth Fe	e Calculator	
A) Company Informati	tion			10'x10' with mandatory Virtual Ex	thibit Hall fee	
Please type or print clearly. (Note:	: Name and address of company will be publish	shed <b>EXACTLY</b> as indicated below. Plea	ase do not abbreviate.)	(Virtual booth and certificate of in	surance included)	= \$5,663
				Additional booth(s) @ \$5,	,418 each	= \$
Company				1 Corner @ \$300		= \$
Corporate Headquarters Street Addr		Suit	ite # / P.O. Box	2 Corners @ \$600		= \$
Corporate neauquarters street naun	ess	June	.e # / r.u. box	4 Corners @ \$1,200		= \$
City	State	ZIP Code Cour	untry	Booth total		= \$
				☐ Corner Optional ☐ Mandat	ory Corner	
Telephone  Email Address for Attendee Inquiries		Website		C) Booth Preference Note: The exhibit configuration mu Enter booth numbers from the flo		lations.
(Publicly shown on the Virtual Exhib		Mensife		1st Choice	3rd Choice	5th Choice
Exhibitor Contact Infor				2nd Choice	4th Choice	6th Choice
	AOMS use only and will not be published. Send	all exhibition information to (specify	contact):	Please note the companies that yo to or immediately opposite in the	ou do not wish to be locate	
Contact Name						
Title						
Title				What are your company's main obj	jectives for participating i	n this exhibition?
Contact Phone	Ext.	Contact Cell				
Email Address (Exhibitor bulletins an receive show-related information.)	nd important updates may be sent via email. NOTE	E: If you choose to unsubscribe from AAOI	MS emails, you will not			
receive snow retuted informations,				D) Payment Schedule		
Contact Name (please print or type)	)			Please refer to the top of this appli	•	
			_	AAOMS accepts American Express, checks in U.S. dollars.	Discover, MasterCard and \	lisa as well as company
Contact Signature <b>Required</b>				CHCCAS III O.S. assus.		
			I			
Product Category Inde	<b>ex</b> : Please provide a product categories list as it shoul	ald annear in the Annual Meeting Final Progr	aram and the Virtual Exhibit Hall, Number vo	our product categories 1 through 5 in order (	of priority (number 1 indicatin	o primary product category)
Clinical	Cosmetics	Lasers & Electrosurgery	Practice Management			
Anesthesia, Emergency	Dental Implant Equipment	Products	Computer Hardware	Systems		ociation/Organization
& Monitoring Equipment	& Systems	Medical Devices and Implants	& Software	Office Furniture & Des	sign Cor	porate Gifts
Blood & Tissue Bank	Facial Implant Products	Nutrition	Education & Training	Office Supplies	Rec	cruiting
Cameras/Photography Equipment	Grafting Materials	Pharmaceuticals/Drugs	Financial Services	Practice Broker		
	Imaging, X-ray & Diagnostics	Surgical Equipment & Supplies	Market Research & Consulting	Practice Management	t	
Cleaning & Sterilizing Equipment	Infection Control	TMJ Devices	•	Precious Metals		
-1	Laboratory Services & Supplies	Telescopes & Light Sources	Medical & Dental Publishing	ng Web Design		
Date Bo	x Booth Size Booth(s) Assigne	Den Den	posit Received Check/Cre	redit Card Ranking Time/	1#	



Send form to:

AAOMS Exhibits Team AAOMS 9700 W. Bryn Mawr Ave. Rosemont, IL 60018-5701

exhibitor@aaoms.org Phone: 847-233-4316

New AAOMS Exhibitor – Product Information (required): Please list each product or service to be exhibited and check any columns that apply and/	٦r
describe its present status	

	Product has FDA	Product is	Previously exhibited at	
Product	Premarket Approval?	FDA-approved?	an AAOMS Meeting?	
				_
If any of these products are please note here and explai	, , , , , , , , , , , , , , , , , , , ,	re the subject of an unfavorable or caution	nary report by an agency of the American Dental Associat	tio
Will your company be exhib	oiting anything categorized as FDA Class III?	□ Yes □ No		_
, , ,				
, , ,				
lf yes, please explain:	annarturities amilable sevagate cumparters	can acily identify a current entire	to fit their marketing goals and hudget	_
lf yes, please explain:	n opportunities available, corporate supporters ude:	can easily identify a support option (	to fit their marketing goals and budget.	_
If yes, please explain:  With almost three dozen	ude:	can easily identify a support option t	to fit their marketing goals and budget.	
If yes, please explain:  With almost three dozen  Some opportunities inclu	ude:	, , , , ,		_
If yes, please explain:  With almost three dozen  Some opportunities inclu  Mobile app advertising	ude:	Advertising  ● Final Program adv		
If yes, please explain:  With almost three dozen Some opportunities inclu  Mobile app advertising  Charging stations	ude:	Advertising  ■ Final Program adv  ■ AAOMS Today mer	vertisement	
With almost three dozen Some opportunities incl  Mobile app advertising  Charging stations  Banners	ude:	Advertising  ■ Final Program adv  ■ AAOMS Today mer  Advertising Contact:  Bob Heiman	vertisement	
With almost three dozen Some opportunities inclu  Mobile app advertising  Charging stations  Banners  Hotel key cards	ude: options	Advertising  ■ Final Program adv  ■ AAOMS Today mer  Advertising Contact:  Bob Heiman  RH Media, LLC	vertisement	
If yes, please explain:  With almost three dozen Some opportunities inclu  Mobile app advertising  Charging stations  Banners  Hotel key cards  Badge lanyards  For more information regard opportunities, contact:	ude: options	Advertising  ■ Final Program adv  ■ AAOMS Today mer  Advertising Contact:  Bob Heiman  RH Media, LLC  11 Gainsboro Drive	vertisement mber magazine advertisement	
With almost three dozen Some opportunities inclu  Mobile app advertising  Charging stations  Banners  Hotel key cards  Badge lanyards  For more information regar	ude: options arding Corporate Support	Advertising ■ Final Program and ■ AAOMS Today men Advertising Contact: Bob Heiman RH Media, LLC 11 Gainsboro Drive West Berlin, NJ 0809	vertisement mber magazine advertisement	

### **FCC Compliance**

For AAOMS to be in compliance with pending FCC regulations, please sign below to allow AAOMS to keep you informed of the latest changes, products and services available. Signing this form will allow AAOMS and its official contracted service suppliers to contact you with important information about the Association and conference services.

AAOMS must have your signature on file. AAOMS never sells or shares exhibitors' phone or email information to outside parties.

Signat	ture							
-								
$Date_{\_}$		 	 	 	 			

### Acceptance

The acceptance of this application shall be at the sole discretion of AAOMS and, upon acceptance, becomes a contract. By completing and signing this application, the undersigned agrees to comply with, and be subject to, the terms and conditions contained in the Exhibitor Prospectus as well as the Exhibitor Regulations. AAOMS reserves the right to refuse or deny exhibit space at the 108th AAOMS Annual Meeting, Scientific Sessions and Exhibition to prospective exhibitors.

## **Exhibition Regulations**

The Exhibition Regulations governing exhibitors as printed in the Exhibition Regulations document are part of the contract. All exhibitors and their representatives must abide by these regulations. Acceptance of exhibiting firms by AAOMS and assignment of booth space will be coordinated by the AAOMS Exhibition Manager. Verification of acceptance will be sent to the exhibitor. AAOMS will not be held liable for scientific context of descriptions provided by exhibiting firms.