



2019 World's Fair of Dentistry

September 21 & 22, 2019

Registration Form

COMPANY: _____

CONTACT PERSON: _____

PHONE: _____

EMAIL: _____

Representatives Attending (For Name Badges) (Registration Fee includes 2 attendees; additional attendees are billed at \$50 per person per day)

1. _____

2. _____

3. _____

4. _____

Raffle item(s) (Must be of at least \$100 in value)

1. _____

Will you require an electrical outlet: Y / N

Will you be bringing a free standing backdrop for your display: Y / N

Fees: Check all that apply:

Early Registration Saturday: \$1,000____

Early Registration Sunday: \$1,000____

Early Registration Weekend: \$1,300____

Early Registration Double Space \$1,950____

Regular Registration Saturday: \$1,100____

Regular Registration Sunday: \$1,100____

Regular Registration Weekend: \$1,400____

Regular Registration Double Space \$2,100____

Premium Spot: \$500_____

Additional attendees: \$50 per person per day_____

Lunch Lecture: \$2,000_____

In lieu of a raffle Item: \$150_____

Total Payment: \$_____

Name on Credit Card: _____

Credit Card # _____

Expiration Date _____ CVV Code_____

Payment can also be made by credit card over the phone or by check made payable to QCDS.

Any questions, call Oleg Rabinovich (718) 454-8344 or email him at ed@qcds.org

COMPLETE AND RETURN VIA EMAIL (ed@qcds.org) OR FAX (718-454-8818).