

2024-2025: Sponsorship Contract

We understand that by signing this contract and forwarding payment, we are confirmed for participation. There will be no refunds for cancellations made less than 60 days in advance.

All fees must be paid upon confirmation of sponsorship.

Please email the form to ematlock@nvds.org

You can also fax the form to 703 750-2261 or mail to:

Northern Virginia Dental Society, 4330 Evergreen Ln, Ste N, Annandale, VA 22003-3259

Registration will be confirmed by email.

Please select your sponsorship opportunity:

___ Annual Business Meeting (9/5/24)

___ TopGolf (9/26/24)

___ Executive Committee Meeting (select preferred dates)

___10/8/2024 ___1/12/2024 ___1/7/2025 ___2/11/2025 ___4/8/2025 ___6/10/2025

___ New Member Orientation Goody Bag - Fall (11/21/24)

___ New Member Orientation Goody Bag - Spring (4/10/25)

___ Speed Interviewing (5/1/25)

___ Shred-A-Thon (6/27/25)

COMPANY NAME

NAME OF CONTACT PERSON

CONTACT EMAIL ADDRESS

BUSINESS PHONE

FAX NUMBER

NAME OF COMPANY TO BE USED ON MEETING ADVERTISING MATERIALS (IF DIFFERENT THAN ABOVE)

SIGNATURE