EXHIBITOR PROSPECTUS

THE GREATER LONG ISLAND DENTAL MEETING

GLIDM

GREATER LONG ISLAND DENTAL MEETING

Hosted By:

Nassau County DENTAL SOCIETY

Suffolk County DENTAL SOCIETY

2027

GLIDM
May 2

HILTON HOTEL
MELVILLE, NEW YORK

WELCOME

Dear Prospective Exhibitor,

We would like to take this opportunity to welcome you to the 61st Annual Session of the Greater Long Island Dental Meeting!

The Greater Long Island Dental Meeting will be held on Sunday, May 2nd at the Hilton Hotel in Melville, New York. GLIDM is graciously sponsored by the Nassau and Suffolk County Dental Societies.

Courses will begin at 8AM and run until 6PM that evening.

The cost for sponsorship **is $1195 per table for the day. The room will be open for you to set up beginning at 6:00 AM. Also available is a WiFi Sponsorship. This is limited to just one exhibitor. When anyone accesses the Wifi it will open with "WiFi sponsored by (Your Company Name and Table #). The cost for this is $2000**

An Early Bird special will be in effect until 1/15/27. Registration on or prior to that date will be $900 per table, a $295 savings.

Your contract will be accepted on a first-come, first-serve basis. Every effort will be made to respond to your requests regarding table assignment. To reserve table space, kindly fill out the enclosed application and remit payment to the Nassau County Dental Society. Payment can be made by check or credit card (all major credit cards accepted).

Our Exhibitors are truly the foundation of GLIDM. We would like to take this opportunity to thank you for your many years of continued support and look forward to having you join us in this transition year while we plan to continue the tradition of dental excellence that GLIDM has always represented. If you have any questions or need assistance with this process, please contact either Dr. Gene Porcelli at 516-227-1112 or Mr. Bill Panzarino at 631-232-1400. You can also email us at nassau.suffolk.ed@gmail.com

Warm regards,
GLIDM Planning Board

GLIDM GREATER LONG ISLAND DENTAL MEETING

TERMS AND CONDITIONS

ASSIGNMENT OF TABLE: Each exhibit space shall be assigned solely by the Committee and no such assignment shall be deemed unless and until the requisite contract for specified space, duly signed by the Exhibitor, is delivered to and accepted by the Committee. We understand that requested assignments for table space shall be honored whenever possible with the preferences indicated by each exhibitor. However, GLIDM cannot guarantee any particular space.

TERMS OF PAYMENT: Payment for selected sponsorship shall be paid on delivery of the Exhibitor's signed contract and no later than March 30, 2027.

CANCELLATION OF BOOTH SPACE: It is agreed by the exhibiting company and the Greater Long Island Dental Meeting that prior to March 30, 2027, the Exhibitor, without loss of funds, may cancel the contract. Cancellation on or after March 30, 2027 requires forfeiture of the entire amount paid.

SET-UP: Exhibit space will be available for set-up on Sunday, May 2nd after 6:00 am. All exhibit set-ups must be completed on Sunday, May 2nd by 8:00 am. No setting up of exhibit space is allowed at any time thereafter. Set up will not be available the night before.

DISMANTLING OF EXHIBITS: The Exhibition Hall will close on Sunday, May 2nd at 6:00 pm. All post-show exhibits not removed by 8:00 pm on Sunday, May 2nd will be removed by GLIDM at the express risk and expense to the exhibitor.

MATERIAL SENT DIRECTLY TO THE HILTON HOTEL. Neither the Committee nor the Hotel shall have any liability or responsibility whatsoever for any loss or damage or destruction of any of the equipment, materials, or property shipped by the Exhibitor.

SUBLETTING OF SPACE: The Exhibitor agrees that the display will be confined to the area of space reserved; and that subletting or showing products other than those manufactured or represented by the exhibitor, are strictly prohibited.

ELECTRICAL CONNECTIONS: **Your exhibit space will be supplied one (110 volt) upon your advanced request.** If an Exhibitor has additional electrical or phone line needs, then the Hilton Hotel must be informed one month prior to the Meeting to make arrangements for these additional requests (a separate electrical form will be included in the Exhibitor Show Packet).

SECURITY AND INSURANCE: The Exhibitor is urged to take all precautions necessary to protect their displays and property against any damage, loss or destruction. Neither the management of the Hilton Hotel nor the Greater Long Island Dental Meeting will be responsible for the safety of the Exhibits against theft, damage by fire, accident or other causes. Although the Committee plans to provide watchmen in connection with the conduct of the exhibition, the same shall not constitute the assumption by the Committee or the Hilton Hotel of any liability or responsibility for the safety or security of the Exhibitor, their agents, representatives, employees or guests, as well as their exhibit display or property. Any exhibitor wishing to insure his personnel or goods against injury, theft, damage by fire, accident or other cause, must do so at exhibitor's own expense.

SOLICITING RELATIONS: It is forbidden to have any representatives of the company solicit their customers or attendance at any other area in the building other than their own table. Salesmen and representatives of companies not exhibiting will be prohibited from soliciting from the exhibit floor.

CIRCUMSTANCES BEYOND CONTROL: In the event that due to fire or other casualty, strikes, lockouts, construction operations, action or any condition by the Hilton Hotel, litigation, action of the elements, act of God, or other circumstances beyond the Committee's control, the Meeting is not held, the exhibition is barred, prevented or canceled, or the Exhibitor's space is not made available for its use (for reasons other than the Exhibitor's breach of default), then and in any of such events, the sole obligation of the Committee shall be to refund to the Exhibitor all sums theretofore paid to the Committee under the Exhibitor's contract, and both parties shall thereupon be deemed released of and from all further liability under said contract.

COMMITTEE: The Committee shall have the right to bar, eject and remove from the Exhibition and the area in which the same is conducted, any and all persons whom it may deem objectionable or who fail or refuse to comply with any of the Terms and Conditions stated.

THE GREATER LONG ISLAND DENTAL MEETING EXHIBITOR CONTRACT

Date_____

Please reserve exhibit space for our use at the Greater Long Island Dental Meeting being held at the Hilton Hotel in Melville, NY on May 2, 2027 on the official floor plan as requested. We understand that our use of this space is subject to the Terms and Conditions stated in this contract, which upon acceptance by the GLIDM, shall become a binding contract between the exhibitor and the Greater Long Island Dental Meeting.

Full payment is required upon delivery of this contract to GLIDM. Payment can be made by check payable to the Nassau County Dental Society or by credit card.

My signature below indicates that I agree to the terms and conditions as well as to the terms of the contract. Completed applications and payments should be forwarded to the Nassau County Dental Society 377 Oak St. Suite 204 Garden City NY 11530. Questions may be directed to either Dr. Gene Porcelli at 516-227-1112 or Mr. Bill Panzarino at 631-232-1400. You can also email us at nassau.suffolk.ed@gmail.com

Neither the Greater Long Island Dental Meeting, nor the Nassau and Suffolk County Dental Societies, and/or their representatives, nor employees of the Hilton Hotel will be responsible for any injury, loss or damage which may occur to the exhibitor or exhibitor's employees or property for any cause whatsoever. The Exhibitor, on signing this contract, expressly releases the foregoing named GLIDM, Nassau County Dental Society, Suffolk County Dental Society, the Hilton Hotel or individuals from any and all claims for such loss, damage or injury.

Please type or print the information below as it should appear on any promotional information. All information below will be used for advertising purposes. Please complete in full – thank you.

COMPANY NAME _____

ADDRESS: _____

CITY, STATE, ZIP: _____

WEBSITE: _____TELEPHONE: _____

CONTACT PERSON: _____ TITLE: _____

EMAIL: (REQUIRED):_____ PHONE: _____

LOCAL REPRESENTATIVE: _____ PHONE: _____

TABLE # PREFERENCE: _____1ST _____ 2ND _____ 3RD _____4TH

SPONSORSHIP LEVEL (Check one): ☐ **TABLE SPONSOR** ☐ **Wi Fi SPONSOR**

SIGNATURE: _____

PAYMENT

Method of Payment:

- CHECK (Payable to Nassau County Dental Society)

- CREDIT CARD: AMEX MC VISA DISCOVER

CREDIT CARD #: _____ EXP: _____ CVV:_____

CARDHOLDERS NAME: _____ BILLING ADDRESS: _____

AMOUNT: $ _____ SIGNATURE: _____

EXHIBIT FEES*:

Table Sponsor: $1195 after 1/15/27; $900 on or before 1/15/27.

TABLE DISPLAYS INCLUDES:

1. (1) 6' x 42" skirted table
2. (1) counter height stools/Chair per table
3, (1) 110-volt electric outlet upon request

Wi Fi Sponsor: $2,100 (Limited to ONE sponsor, first come, first served)

Wi Fi SPONSOR INCLUDES:

1. (1) Sponsor Table with everything listed above.
2. The phrase "Wi Fi provided by (Your Company Name)" every time an attendee accesses the Wi Fi.

PLEASE NOTE THAT THE ENTIRE EXHIBITION AREA IS CARPETED

MEETING INFORMATION AT A GLANCE

2027 DATE: May 2, 2027
VENUE: Hilton Hotel, Melville, NY
ADDRESS: Hilton Hotel
598 Broadhollow Rd (Route 110)
Melville, NY 11747
Tel #: 631-845-1000
Contact: Brittney Scott
Email: brittney.scott@hilton.com

MOVE IN: Sunday, May 2 – 6:00 am to 8 am
MOVE OUT: Sunday, May 2 - after 6:00 pm
EXHIBITION HOURS: Sunday, May 2 8 pm - 6 pm

For additional information or assistance in planning your event, please contact:
Dr. Gene Porcelli at 516-227-1112 or Mr. Bill Panzarino at 631-232-1400
Or Email: nassau.suffolk.ed@gmail.com