

WESTERN LOS ANGELES DENTAL SOCIETY
14722 Hawthorne Blvd., Lawndale, CA 90260-1505
310.349.2199 fax 310.349.2175
Westernlads.org

2019 Exhibitor Application

Company Name: _____
Exhibitor Name(s): _____

Mailing Address: _____

Product(s) to display: _____

Phone Number: _____
Fax Number: _____
E-mail address: _____

2019 Continuing Education Courses

1. ___ Friday, January 18, 2019 – OSHA/Infection Control/CA Dental Practice Act practice
(All- day) 10am- 5pm
Location- The DoubleTree Hotel (Culver City) \$400
2. ___ Tuesday February 12, 2019 – Where Saving Dollars Makes Sense: Fine Tuning the Supply Side of Your Practice
(½- day) 6:00-9:30 pm
Location- Whiskey Red (Marina Del Rey) \$250
3. ___ Tuesday, March 19, 2019- Medication-related Osteonecrosis of the jaws (MRONJ) for the Practicing Dentist
(½- day) 6:00-9:30 pm
Location- The DoubleTree Hotel (Culver City) \$250
4. ___ Thursday, May 9, 2019– Endo
(½- day) 6:00- 9:30pm
Location- TBD) \$250
5. ___ Friday, September –13, 2019- All Day Lasers
(All- day) 8:00am -5pm
Location- The Olympic Collection (West LA) \$400
6. ___ Tuesday, October 15, 2019 – Treatment Planning & Legally Mine
(½- day) 6:00-9:30 pm
Location- TBD \$250
7. ___ **Thursday**, November 21, 2019 – Anesthesia
(½- day) 6:00-9:30 pm
Location- TBD \$250

Exhibitor fee(s) - fee includes business card ad in our newsletter for 1 quarter (\$150.00 value) and meal for one representative. Additional meals \$25 per person

Please circle business category

Business & Financial Services
Computer Consultant/Software/Hardware
Computer Imaging
Credit & Collection Programs
Dental Education / CPR
Dental Equipment Sales & Leasing
Dental Instruments
Dental Laboratory
Dental Office Design & Construction
Dental Products / Supplies
Equipment Repair & Maintenance
Hand-piece Sales / Repairs
Hazardous Waste Handlers
Implants

Insurance & Insurance Services
Intra Oral Camera
Lasers
Legal Services
Miscellaneous
OSHA / Infection Control
Personnel Services
Pharmaceuticals
Physical Therapy
Practice Management / Marketing
Practice Sales
Web Design
Whitening / Bleaching

***I need an electrical outlet: ____

(if you require electricity, please bring an extension cord)

Payment Options: - check below for type of payment

Enclosed is our check in the amount of \$ _____ for the program meeting date(s) marked.

Mail to:

Western Los Angeles Dental Society
14722 Hawthorne Blvd, Ste. B
Lawndale, CA 90260-1505
or

Please charge credit card for the amount \$ _____

Card Type: Visa – MasterCard – Amex

Credit card #: _____

Name on card: _____

Exp. Date: _____ Card security code: _____

Authorizing Signature: _____

***fax (secure) credit payment to 310.349.2175

If you have any questions, call 310.349.2199 or email us at staff@westernlads.org

All exhibitors are subject to approval by the Board of Directors; Board reserves the right to reject exhibitors as necessary.