

Sponsorship Agreement

MUSIC CITY DENTAL CONFERENCE
RENAISSANCE NASHVILLE HOTEL
NASHVILLE, TENNESSEE
MAY 30 - JUNE 1, 2024

SPONSORSHIP LEVEL

- | | |
|---|--|
| <input type="checkbox"/> Diamond (\$10,000) | <input type="checkbox"/> Tote Bag (\$5,000 Limit 1) |
| <input type="checkbox"/> Platinum (\$7,500) | <input type="checkbox"/> Mobile App (\$3,000 Limit: 1) |
| <input type="checkbox"/> Gold (\$5,000) | <input type="checkbox"/> Awards Luncheon (\$3,000 Limit: 3) |
| <input type="checkbox"/> Silver (\$2,500) | <input type="checkbox"/> Continental Breakfast (\$2,500 Limit 4) |

COMPANY INFORMATION

Company Name _____
Primary Contact _____ Title _____
Street Address _____
City _____ State _____ Zip _____
Primary Contact Email _____ Phone _____ Ext. _____

PAYMENT INFORMATION

Checks should be made payable to the Tennessee Dental Association; Credit card payments by **MasterCard or Visa only**.

Credit Card Number _____ Expiration Date _____
Name on Card _____ Security Code _____
Amount to be charged _____ Signature of Cardholder _____

It is understood and agreed by both the sponsor and provider that:

- 1.No formal endorsement shall be stated or implied by the provider for any service as a result of this sponsorship.
- 2.The provider shall have total control over all aspects of the seminars, including how many, location, presenters, etc.
- 3.The seminar materials prepared for use in the activities are the property of the provider and/or the speakers, which have all rights to these materials and their copyrights.

Signature _____ Signature _____
Sponsor (name & title) _____ Date _____ Provider (name & title) _____ Date _____

Guidelines Regarding Sponsor and Conflict of Interest

The Tennessee Dental Association, in planning continuing education programming for MCDC, will adhere to the following policies:

1. Program topic selection will be based on perceived needs for professional information and not for the purpose of endorsing specific commercial drugs, materials, products, treatments, or services.
2. Funds received from sponsors in support of the meeting shall be unrestricted, and the Tennessee Dental Association shall retain exclusive rights regarding the management of the meeting, selection of presenters, instructional materials, program content and format.
3. Sponsors shall be acknowledged in promotional materials, pending receipt of agreement and publication date of materials.
4. Speaker sponsors shall be limited to: a.the payment of reasonable honoraria; b.reimbursement of presenters' out of pocket expenses; and c.the payment of the cost of modest meals or social events held as part of an educational activity.
5. Presenters shall be instructed to avoid recommending or mentioning any specific product by its trade name, using generic terms whenever possible. When reference is made to a specific product by its trade name, reference shall also be made to competitive products.
6. Speakers will be required to disclose to TDA any potential bias to commercial companies.

The Tennessee Dental Association shall:

1. Be responsible for a contract directly with any continuing education speaker to assure educational requirements are met.
2. Be responsible for the content, quality, and scientific integrity of all CE activities.
3. Assure that presentations give a balanced view of all therapeutic options.
4. Assure that commercial exhibits do not influence planning or interfere with the presentation or CE activities.
5. Be responsible for making ultimate decisions regarding funding arrangements.
6. Assure that social events do not compete with, nor take precedence over, the educational events.
7. Have a policy on conflict of interest and assure that all CE activities conform to this policy.

**SUBMIT YOUR APPLICATION
AND PAYMENT TO:**

Tennessee Dental Association
660 Bakers Bridge Ave. Ste. 300, Franklin, TN 37067
mcdc@tndental.org • 615-628-0214 (fax)