

Application for Exhibit Space

The Kentucky Meeting
French Lick Resort French Lick, IN August 23-26, 2018

Kentucky Dental Association

1920 Nelson Miller Parkway Louisville, KY 40223-2164 ATTN: Janet Glover

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d the balance on or before have received. Appli	ore June 1, 2018 and to be governed by all cations received after June 1, 20	stated on the official floor plan as follows: A minimum of \$650.00 per booth upon applica terms, conditions, rules and regulations as set forth in the official prospectus, a copy of w D18 must be accompanied by payment in full. No deposits will be refunded BOOTH SPACE WILL BE PRINTED IN THE MEETING PROGRAM.
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Acknowledged: _____

Deposit: ____

Space Assigned: _

The information requested above will assist us greatly in making final booth assignments. We appreciate your cooperation in providing complete details.