



# American Academy of Fixed Prosthodontics

## APPLICATION FOR EXHIBIT BOOTH 2025

**INSTRUCTIONS:** Please read the application form along with the rules and regulations. Complete the necessary fields and send this form along with payment receipt via email to Dr. Judy Yuan, Chair of the Exhibits Committee, at [yuanjudy@uic.edu](mailto:yuanjudy@uic.edu).

Please register and make the payment online at:

[https://www.fixedprosthodontics.org/cgi/ex.cgi/page/AAFP/Calendar/AAFP\\_74th\\_Annual\\_Meeting\\_Sponsor\\_Exhibitor\\_Registration](https://www.fixedprosthodontics.org/cgi/ex.cgi/page/AAFP/Calendar/AAFP_74th_Annual_Meeting_Sponsor_Exhibitor_Registration)

**YOUR CONTRACT:** This application, the formal notice of space assignment which you will receive and full payment of exhibit rental charges for the February 20 - 22, 2025 AAFP Meeting constitute a contract for your organization to exhibit at this meeting. In the event of fire, strikes or other uncontrollable circumstances this contract will not be binding. The AAFP reserves the right to cancel any contract with any exhibitor at any time prior to or during the meeting.

**PLEASE PRINT**

**COMPANY NAME:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**CONTACT PERSON:** \_\_\_\_\_

**BUSINESS PHONE:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**E-MAIL:** \_\_\_\_\_

**NUMBER OF EXHIBIT BOOTH(S) REQUESTED:**                      **ONE** \_\_\_\_\_ **TWO** \_\_\_\_\_

**NUMBER OF ADDITIONAL PARTICIPATING REPRESENTATIVE(S) (IF MORE THAN TWO PER BOOTH):** \_\_\_\_\_  
*(Please note: Two representative passes are allowed per booth space. If the exhibitor wishes to staff more than two personnel per booth space, an additional fee may be applied to cover associated food costs. This may be arranged with the Exhibits Chair)*

**PRINCIPAL PRODUCT OR SERVICE TO BE EXHIBITED:** \_\_\_\_\_

**EXHIBITOR'S PREFERRED LOCATION:**

*Please consult the enclosed floor plan for the 2025 AAFP Meeting as you indicate your preferred exhibit space(s). Please indicate all three choices, in the event that some of your preferences may have already been assigned.  
Booths #'s 118, 119, 120, 121, 122, 123, 128, 129, 130, 131, 136, 137 will be reserved for corporate sponsors.*

1<sup>st</sup> CHOICE: BOOTH #: \_\_\_\_\_  
2<sup>nd</sup> CHOICE: BOOTH #: \_\_\_\_\_  
3<sup>rd</sup> CHOICE: BOOTH #: \_\_\_\_\_  
SAME AS LAST YEAR: \_\_\_\_\_

**AAFP USE ONLY:**

BOOTH(S) ASSIGNED \_\_\_\_\_  
Booth FEE: \$ \_\_\_\_\_  
Online Payment Done: \_\_\_\_\_  
DATE: \_\_\_\_\_

Make your payment online at:

[https://www.fixedprosthodontics.org/cgi/ex.cgi/page/AAFP/Calendar/AAFP\\_74th\\_Annual\\_Meeting\\_Sponsor\\_Exhibitor\\_Registration](https://www.fixedprosthodontics.org/cgi/ex.cgi/page/AAFP/Calendar/AAFP_74th_Annual_Meeting_Sponsor_Exhibitor_Registration)

For **\$2500.00 (US Funds) per booth.**

Does your company plan to participate in the American Equilibration Society (AES) meeting scheduled for February 2025?  
*Please Circle ONE:*                      **YES**                      **NO**                      **DON'T KNOW**

**PLEASE SEND THIS APPLICATION ALONG WITH PAYMENT RECEIPT TO:**  
Judy Chia-Chun Yuan, DDS, MS, MAS, FACP, Chair of the Exhibits Committee  
Email: [yuanjudy@uic.edu](mailto:yuanjudy@uic.edu)