

American Academy of Periodontology 105th Annual Meeting November 2-5, 2019 Chicago, Illinois

EXHIBITOR FUNCTION RESERVATION FORM

Exhibitor-sponsored private functions are separately organized events during which exhibitors can meet with American Academy of Periodontology (AAP) participants outside of the exhibition hall to network, entertain, and continue business started on the exhibit floor.

Exhibitors sponsoring any type of private function are required to adhere to the following guidelines:

- The AAP must be informed of all planned functions. Exhibiting companies must complete the "Exhibitor Function Reservation Form" and submit it to the AAP for space approval.
- Exhibiting companies must clarify that their events are not official AAP functions.
- Host companies agree to assume all liability for their functions.
- Exhibitors will assume all costs associated with their functions, e.g., food and beverage, audiovisual, room rental, etc.
- No functions can be held opposite an AAP-sponsored event. Functions are allowed only during the following program-free hours:
 - Friday, November 1 7:00 am 5:00 pm and 7:00 pm 12:00 midnight
 - Saturday, November 2 7:00 pm 12:00 midnight
 - Sunday, November 3 7:00 pm 12:00 midnight
 - Monday, November 4 6:30 pm 12:00 midnight (Requests for Monday evening will not be processed until July 31, 2019, to allow for the placement of alumni events.)
 - > Tuesday, November 5 5:00 pm 12:00 midnight
- Exhibitors requiring space for staff meetings should indicate their desired dates and times regardless of the program-free hours listed above.
- Please complete this form for any Annual Meeting event even if the event is to be held prior to Saturday, November 2. For best availability, return this form no later than September 13, 2019.

Note: Non-exhibiting companies are prohibited from hosting functions at the AAP Annual Meeting.

If you have any questions, please contact Meeting Services via phone at 312-787-5518, via fax at 312-573-3225, or via e-mail at meetingsinfo@perio.org.

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Official Name of Function:	Food and Beverage Requirements: Breakfast (buffet, plated, continental) Beverage break (hot, cold, hot & cold) Lunch (buffet, plated, boxed)
Function Day/Date:	☐ Cocktail reception (hors d'oeuvres/drinks) ☐ Dinner (buffet, plated)
Function Start Time:	Diffier (buffer, plateu)
Function End Time:	Audio-Visual Equipment Requirements:
Expected Attendance:	None
	Podium
Type of Function:	Podium microphone
Reception	LCD projection package (for PowerPoint) with screen
Dinner	☐ Flatscreen
☐ Business Meeting	Other
☐ Seminar	
Other	Name and address of individual to whom reservation information should be sent:
Desired Location:	PLEASE PRINT
☐ McCormick Place Lakeside Center	Name:
Hilton Chicago (co-headquarters hotel)	
Palmer House Hilton (co-headquarters hotel)	Address:
On own (group arrangement made as follows):	
	Phone:
	Fax:
Room Set:	Email:
Reception-style (cocktail tables and bar)	
Banquet-style (rounds of 10)	Return completed form to:
☐ Theater-style (rows of chairs)	AAP Meeting Services American Academy of Periodontology
Conference-style (one large table)	737 N. Michigan Avenue, Suite 800
Other	Chicago, IL 60611-6660 Phone: 312-787-5518 / Fax: 312-573-3225

Email: meetingsinfo@perio.org