

Middlesex County Dental Society

P.O. Box 127, Colonia, NJ 07067

PHONE: (732) 238·1255 FAX: (732) 390·2332

Middlesex County Dental Society - Speakers Agreement

I,\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, accept the invitation of the Middlesex County Dental Society to speak at the MCDS Tuesday evening (monthly) continuing education dinner lecture:

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_TIME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

On the subject(s) of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

And agree to the following as payment in full to be received at the conclusion of my presentation:

HONORARIUM: \_\_\_\_\_\_\_\_\_\_\_LOCATION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Includes any associates or any material that may be distributed to participants)

I agree to abide by the following terms and conditions:

1) Membership in the American Dental Association or an equivalent foreign society is required for all dentists presenting for MCDS at the time of their program.

2) Endorsement of specific products is prohibited in the course of all presentations. This does not, however, preclude the mention of product/company names in discussing specific techniques and procedures.

3) Speakers are not to change the course enrollment or bring anyone else into the course without MCDS's permission.

4) Advertising matter, commercial promotions and sales of any type are absolutely prohibited during any part of the scientific program. Furthermore, no such materials shall be distributed or made available in the meeting room. The only materials allowed in the meeting room are those of the sponsor(s) of the program.

5) Editing computer- generated images requires full disclosure to the audience of the program, specifically if they have been edited in any way to alter their diagnostic or outcome appearance.

6) Handouts will be duplicated by MCDS if originals are received in our office 30 days before the program is scheduled. Handouts are limited to twenty (20) single–sided pages or ten (l0) double–sided pages. Should the speaker elect to reproduce his/her own handouts, MCDS will not be responsible for the cost of the handouts nor the shipping of same.

7) MCDS, in its sole discretion, has the unconditional right to cancel this agreement at any time. Upon cancellation, its liability shall be limited to reimbursement of the actual expenses the speaker has already incurred.

8) The speaker shall be totally responsible for the content of the speakers program and hereby agrees to indemnify and hold harmless the Middlesex County Dental Society from any liability on account thereof.

Speaker Signature Date

Name Degree

Address Phone

City/State/Zip Fax

Social Security Number \_\_\_\_\_\_\_\_\_ – \_\_\_\_\_\_\_\_\_\_ – \_\_\_\_\_\_\_\_\_\_

Signed Date

Middlesex County Dental Society

(A copy of the signed agreement will be sent to you)