

2022 Basic Life Support Renewal Course Sponsorship Contract



San Diego County
DENTAL SOCIETY

By participating as a sponsor at our BLS Renewal events, you have the opportunity to meet face to face with up to 35 dentists and staff in San Diego County, each meeting! This is your chance to promote your company in person, through authentic connections. **Pricing is \$200 per course. All courses are held at the SDCDS office unless otherwise noted. Registration and light dinner: 5:00pm | Course: 5:30pm-9:30pm**

SDCDS 2022 BLS Renewal Course Calendar

Jan. 20th | Mar. 18th | May 19th | Jul. 14th | Aug. 18th | Oct. 13th | Nov. 10th

TERMS OF AGREEMENT:

Regarding Terms, Conditions and Purposes of an Educational Grant between San Diego County Dental Society (SDCDS), an ADA CERP approved provider of continuing dental education, and _____ (herein after the Company) for support of a continuing dental education (CDE) activity.

Title of CE Activity(ies): BLS Renewal for Healthcare Providers

Location: SDCDS Office

Date(s) _____

Company (Commercial Supporter): _____

The above company wishes to provide support for the continuing education activity named above by means of

1. Unrestricted educational grant (sponsorship) in the amount of: \$ _____

CONDITIONS:

1. Statement of Purpose: program(s) is for scientific and educational purposes only and will not promote the company's products, directly or indirectly.
2. Control of Content and Selection of Presenters and Moderators: SDCDS is solely responsible for selection of course content, instructors and moderators based on their qualifications, independence and balance. The Company will not suggest speakers or direct the content of the program.
3. Disclosure of Financial Relationships: SDCDS will ensure meaningful disclosure to the audience at the time of the program, of (a) Company funding and (b) any significant relationship between the Provider and the Company (e.g., grant recipient).
4. Involvement in Content: there will be no "scripting", emphasis, or direction of content by the Company or its agents.
5. Ancillary Promotional Activities: No promotional activities will be permitted in the same room as the educational activity. No product advertisements will be permitted in the same room as the educational activity.
6. Objectivity and Balance: SDCDS will make every effort to ensure that data regarding the Company's products (or competing products) are objectively selected and presented, with favorable and unfavorable information and balanced discussion of prevailing information in the product(s) and/or alternative treatments.
7. Limitations on Data: SDCDS will ensure, to the extent possible, meaningful disclosure of limitations on data, e.g., ongoing research, interim analyses, preliminary data, or unsupported opinion.
8. Opportunities for Debate: SDCDS will ensure meaningful opportunities for questioning or scientific debate.

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9. Independence of SDCDS in the use of Contributed Funds: a. funds are to be in the form of an educational grant made payable to SDCDS; b. all other support associated with this CE activity (e.g., educational materials, course supplies, etc.) must be given with the full knowledge and approval of SDCDS; c. no funds from the Company will be paid directly to the program director, instructor/author, or others involved with the CE activity.

10. SDCDS and the Company agree to abide by all the requirements of the ADA CERP Recognition Standards.

11. SDCDS shall acknowledge educational support from the Company in program brochures, syllabi, and other program materials.

12. Upon request, SDCDS shall furnish the Company with a report concerning the expenditure of the funds provided.

CONTACT & PAYMENT INFORMATION

Contact Person:

Email Address:

Phone:

Address:

City:

State:

ZIP:

Card #:

Exp. Date:

Sec. Code:

Or make a check payable to 'SDCDS' and send to:

San Diego County Dental Society 1275 W Morena Blvd Ste. B San Diego, CA 92110

I understand and agree to the above terms:

Signature: _____ Date: _____