



New York Society of
Addiction Medicine



**2025
INTERSECTION OF
SCIENCE,
TREATMENT AND
POLICY
CONFERENCE**

FEBRUARY 7-8, 2025 | VIRTUAL

EXHIBITOR PROSPECTUS

MARKETING OPPORTUNITIES

Gold Partner

\$ 5,000

- ✓ Virtual Exhibit Booth*
- ✓ Formal recognition before conference plenary session
- ✓ Sponsor Highlight on Virtual Platform
- ✓ Logo link on NYSAM website for twelve (12) months
- ✓ Attendee List with Email Addresses
- ✓ 3 Full Conference Registrations

Silver Partner

\$3,500

- ✓ Virtual Exhibit Booth*
- ✓ Formal recognition before conference plenary session
- ✓ Sponsor Highlight on Virtual Platform
- ✓ Logo link on NYSAM website for six (6) months
- ✓ 2 Full Conference Registrations

Exhibit Booth Only

\$2,000

- ✓ Virtual Exhibit Booth*
- ✓ 1 Full Conference Registration

*Virtual Exhibit Booth includes:

- ✓ Company Information (Logo, website, social media)
- ✓ Posting of up to 3 PDF resources
- ✓ One (1) 30 second Video Clip
- ✓ Zoom Breakout Room during each break on Friday and Saturday to connect with attendees
(NYSAM will set up the breakout rooms on the virtual conference platform. You are responsible to have a company representative in your breakout room during each break)

REGISTRATION FORM

New York Society of Addiction Medicine
21st Annual Intersection of Science, Treatment and Policy Conference
February 7-8, 2025

Our company would like to participate at the NYSAM 2025 Annual Conference

Please Check One: ☐ Gold ☐ Silver ☐ Exhibit Booth Only

CONTACT INFORMATION:

Company Name _____
Company Contact _____
Company Address _____
City _____ State _____ Zip _____
Phone _____ Fax _____
Email _____

COMPANY CONTACT:

(Gold Sponsor gets 4, Silver Sponsor gets 2, Exhibit Booth gets 1)

Name 1: _____
Email 1: _____
Name 2: _____
Email 2: _____
Name 3: _____
Email 3: _____
Name 4: _____
Email 4: _____

PAYMENT INFORMATION

_____ VISA _____ MASTERCARD _____ AMERICAN EXPRESS
Name on Credit Card _____
Credit Card # _____
Credit Card Billing Address _____
City _____ State _____ Zip _____
Charge Amount \$ _____ Expiration Date: _____ Security Code: _____
Signature _____

Email completed form to: Felicia Price or fprice@amgroup.us
Full Payment is required before your participation is confirmed
Deadline to sign up is **January 24, 2025.**