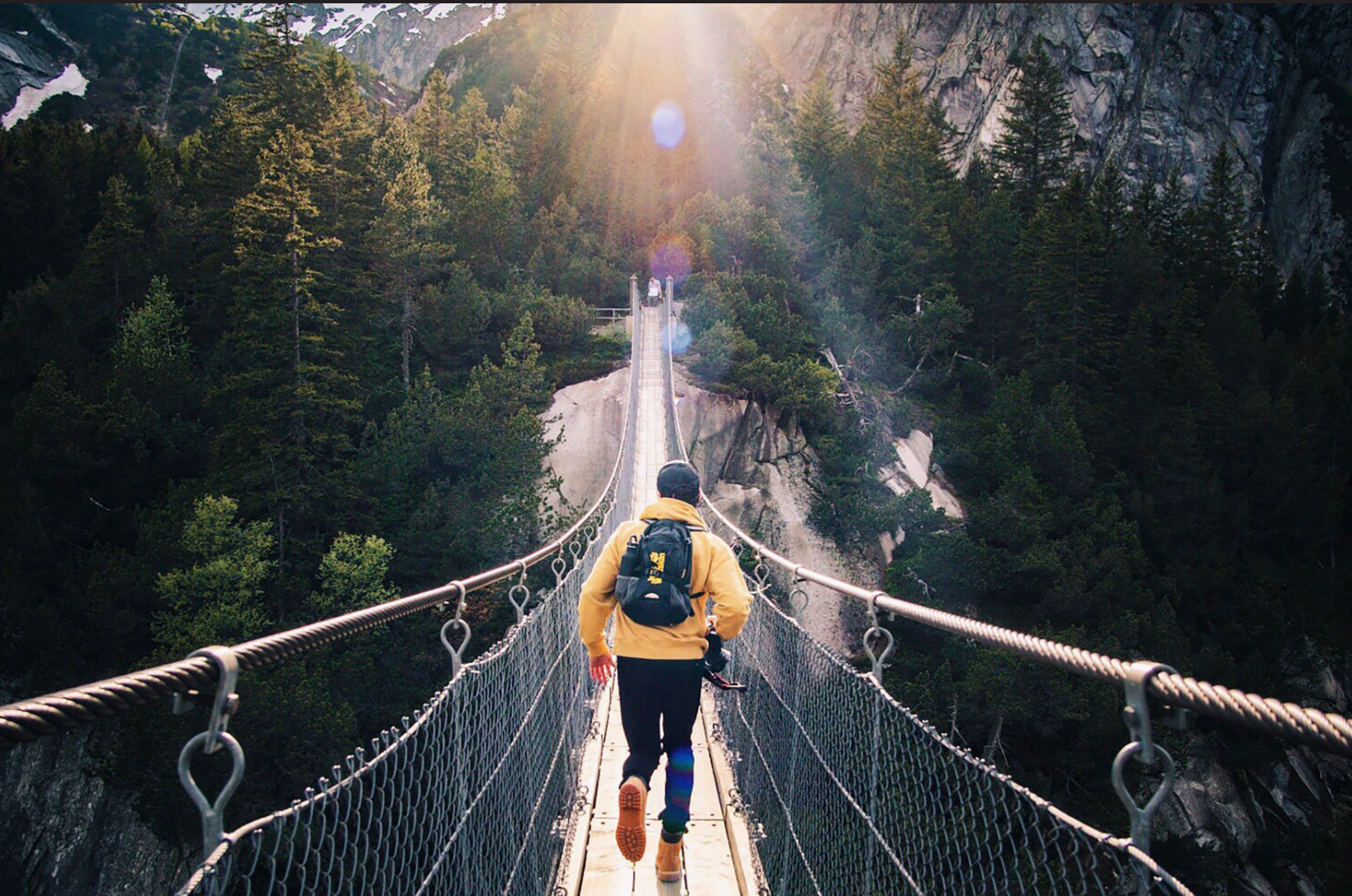


# New York Society of Addiction Medicine

*17th Annual Intersection of Science, Treatment and Policy Conference*

## MARKETING OPPORTUNITIES



## 2021 NYSAM - Virtual Meeting

February 5-6, 2021

[www.nysam-asam.org](http://www.nysam-asam.org)



New York Society of  
Addiction Medicine



## MARKETING OPPORTUNITIES

**New York Society of Addiction Medicine**  
17th Annual Statewide Conference (Virtual)  
February 5-6, 2021

## NYSAM Virtual 2021 - Sponsor Opportunities and Support

### Gold Sponsors: 5 available (\$ 3,000.00)

- Formal recognition during a conference plenary session
- Zoom break-out room for meet & greet conference attendees available 30 min prior to start of meeting to 30 min after and throughout conference for interacting with attendees.
- Logo identification on Conference program (sent out one-week prior PDF format and on NYSAM website)
- Full color half-page advertisement in conference program
- Logo link on NYSAM website x 6 months
- 8 conference registrations

### Silver Sponsor (\$ 2,500.00)

- Logo identification on conference program (sent out one-week prior PDF format and on NYSAM Website)
- Zoom break-out room for meet & greet attendees available 30 min. prior to start of meeting to 30 min after and throughout conference for interacting with attendees!
- Logo link on NYSAM website for six months
- ¼ of page advertisement in conference program
- 8 registrations to conference (public policy and main conference)

### Conference program and NYSAM website only:

- Full page ad in conference program and logo on NYSAM website for 6 months: \$500.00
- ½ page ad in conference program and logo on NYSAM website for 6 months: \$300.00
- ¼ page ad in conference program and logo on NYSAM website for 6 months: \$200.00





# Sponsor/Exhibitor Registration Form

New York Society of Addiction Medicine

17th Annual Statewide Conference

February 5-6, 2021

## OUR COMPANY WOULD LIKE TO SPONSOR NYSAM 17TH ANNUAL CONFERENCE:

Gold Sponsor

Silver Sponsor

Break Sponsor

Advertisement

### CONTACT INFORMATION:

Company Name: \_\_\_\_\_

Company Contact: \_\_\_\_\_

Company Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_

Company name as it will appear in the conference program:

\_\_\_\_\_

### PAYMENT INFORMATION:

We accept checks, made payable to NYSAM, or complete the credit card information below.

Sponsors are responsible for any and all bank charges.

MasterCard  VISA  Amex Discover

Name on Credit Card: \_\_\_\_\_

Card Number: \_\_\_\_\_

Charge Amount: \$ \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Credit Card Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Signature: \_\_\_\_\_