

Alcoholism & Substance Abuse Providers of New York State's
8th Annual Veterans Summit
November 9, 2023

Marketing Opportunities



FRONT SIGHT FOCUSED:
HEALING THE PAST FOR A SUCCESSFUL FUTURE

Embassy Suites
86 Congress Street
Saratoga Springs, New York 12866





Dear Colleague,

The Board of Directors and ASAP's Veterans Summit Planning Committee are excited to offer you an outstanding opportunity to reach ASAP members through our 9th Annual Veterans Summit on November 9, 2023 in Saratoga Springs, NY. Sponsorship opportunities allow you to connect with our system leaders and showcase your organization's commitments to services supporting our veterans.

This packet outlines the marketing opportunities available to your organization in conjunction with the Summit. All opportunities outlined in this packet are designed to maximize your outreach to the industry.

We hope you will be able to join us at this Summit. Should you have any questions regarding marketing opportunities for this conference, please contact me directly at (518) 426-3122 x103 or via e-mail at slafountain@asapnys.org. We look forward to seeing you in November, 2023.

Sincerely,

Sherry LaFountain

Sherry LaFountain
Director of Events Management, Marketing & Development

Marketing Opportunities to Consider:

- Exhibiting at the conference
- Sponsorships of conference activities that offer wide reach and visibility
- Advertising in Conference Program
- Packaging your organization's literature with registration materials

SPONSOR REGISTRATION FORM

9th Annual Veterans Summit

Front Sight Focused: Healing The Past For A Successful Future

We have decided to sponsor the ASAP Veterans Summit

- Platinum Summit Partner Summit Partner Summit Program Partner Summit Gold Partner
 Summit Luncheon Partner Summit Exhibitor Literature Distribution

CONTACT INFORMATION:

Company Name _____

Company Contact _____

Company Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email _____

Company Name as it will appear in the conference program _____

COMPANY CONTACT NAME AND PHONE NUMBER:

To be printed in the conference program _____

Name : _____

Name : _____

** A description of your company will be printed in the conference program. Please limit your company description to 100 words or less. Submit your description via e-mail to slafountain@asapnys.org no later than September 30, 2023. **
All advertisement materials must be received no later than September 30, 2023.

PAYMENT INFORMATION: Check made payable to ASAP is enclosed. Sponsors are responsible for any and all bank charges. A \$50 processing fee will be charged for returned checks.

_____ VISA _____ MASTERCARD _____ AMERICAN EXPRESS

Name on Credit Card _____

Credit Card # _____

Credit Card Billing Address _____

City _____ State _____ Zip _____

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

Signature _____

All checks should be mailed to: ASAP, 194 Washington Avenue, Suite 300, Albany, New York 12210
Email Completed Application to: slafountain@asapnys.org.