



**SAVE THE DATE!**  
The 23rd Annual International Meeting  
San Francisco, November 14-17, 2018



## EXHIBITOR PROSPECTUS

We are excited about **ABM's 23<sup>rd</sup> Annual International Meeting** taking place on November 14-17 in San Francisco, CA.

The conference is an unprecedented opportunity for you to reach key leaders in breastfeeding medicine and an excellent way to forge critical relationships with clinicians as well as with leading health promotion and disease prevention organizations.

More than 400 physicians, advanced practice nurses, lactation consultants, and other healthcare professionals will assemble for a program that includes plenary sessions, workshops, and almost 100 abstracts on a broad range of topics spanning maternal and child health.

### **Exhibitor benefits include:**

- Two complimentary full conference registrations
- Listing on ABM's website
- Recognition in the meeting syllabus and onsite signage
- Social media visibility with a reach of more than 200,000 ABM followers
- Opportunity to network and interact with international leaders in the field of breastfeeding medicine
- Access to educational sessions and latest developments in breastfeeding medicine

Please see the Exhibitor Reservation Form with details about exhibiting and important benefits for your organization.

### **Other Opportunities for Conference Support:**

We would be happy to speak with you about a featured role for your organization at our upcoming conference, including a range of other funding opportunities and benefits.

You may be interested in seeing sample content from [Breastfeeding Medicine](#) our peer-reviewed journal, and visiting our [website](#). Also, let us know if you are interested in journal advertising opportunities.

We look forward to your participation!

Many thanks,

Karla Shepard Rubinger  
Executive Director

*The Academy of Breastfeeding Medicine is affiliated with the United Nations Department of Public Information, the NGO Committee on UNICEF, and has consultative status with ECOSOC.*

914 740 2115 (main)  
914 740-2101 (fax)

**Academy of Breastfeeding Medicine**  
[www.bfmed.org](http://www.bfmed.org)

140 Huguenot Street  
New Rochelle, New York 10801



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## Exhibitor Reservation Form

Opportunities	Benefits
6' draped table in the Exhibit Hall	<ul style="list-style-type: none"> <li>• Two Complimentary Full Conference Registrations</li> <li>• Listing on <i>ABM</i> website</li> <li>• Recognition in Meeting Syllabus and On-Site Signage</li> <li>• Recognition on our Social Media Channels (reach over 40,000 <i>ABM</i> followers)</li> </ul>
Exhibitor Materials – Distribution Only	ABM staff will oversee your exhibit table and replenish materials as needed

Exhibitor Type	By September 1	After September 1
Nonprofit organization	\$500 <input type="checkbox"/>	\$550 <input type="checkbox"/>
For-profit organization	\$999 <input type="checkbox"/>	\$1,200 <input type="checkbox"/>
Materials distribution only (nonprofit)	\$350 <input type="checkbox"/>	\$400 <input type="checkbox"/>
Materials distribution only (for-profit)	\$725 <input type="checkbox"/>	\$795 <input type="checkbox"/>
<i>Please call 914-740-2115 for premier placement rates</i>		

### Payment

You may pay by check, Visa, MasterCard, American Express, or Discover, Checks should be made payable to: **Academy of Breastfeeding Medicine** (must be in U.S. funds drawn on a U.S. bank). Please submit your payment by **October 15**. No refunds for cancellations after that date. Cancellations must be submitted in writing. In no case can a reservation be honored if full payment is not received by the start of the conference.

Enclosed is my check/money order for \$ \_\_\_\_\_

Charge \$ \_\_\_\_\_ to:  Visa  MasterCard  American Express  Discover

Card number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Name on card: \_\_\_\_\_

Billing address: \_\_\_\_\_

Signature: \_\_\_\_\_ Today's date: \_\_\_\_\_

### Contact Information (Please print or type)

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Organization: \_\_\_\_\_ Department: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail address: \_\_\_\_\_ Website: \_\_\_\_\_

Company/Organization Purpose: \_\_\_\_\_

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

By signing this reservation form, the Exhibitor confirms that it supports the WHO International Code of Marketing Breastmilk Substitutes and any related subsequent WHO resolutions, and is in compliance. Acceptance of Exhibit does not constitute *ABM's* endorsement of the organization, its product, or service.

Please complete the form and return by email to [ABM@bfmed.org](mailto:ABM@bfmed.org) or fax to (914) 740-2101 or mail to *Academy of Breastfeeding Medicine*, 140 Huguenot Street, 3<sup>rd</sup> Floor, New Rochelle, 10801