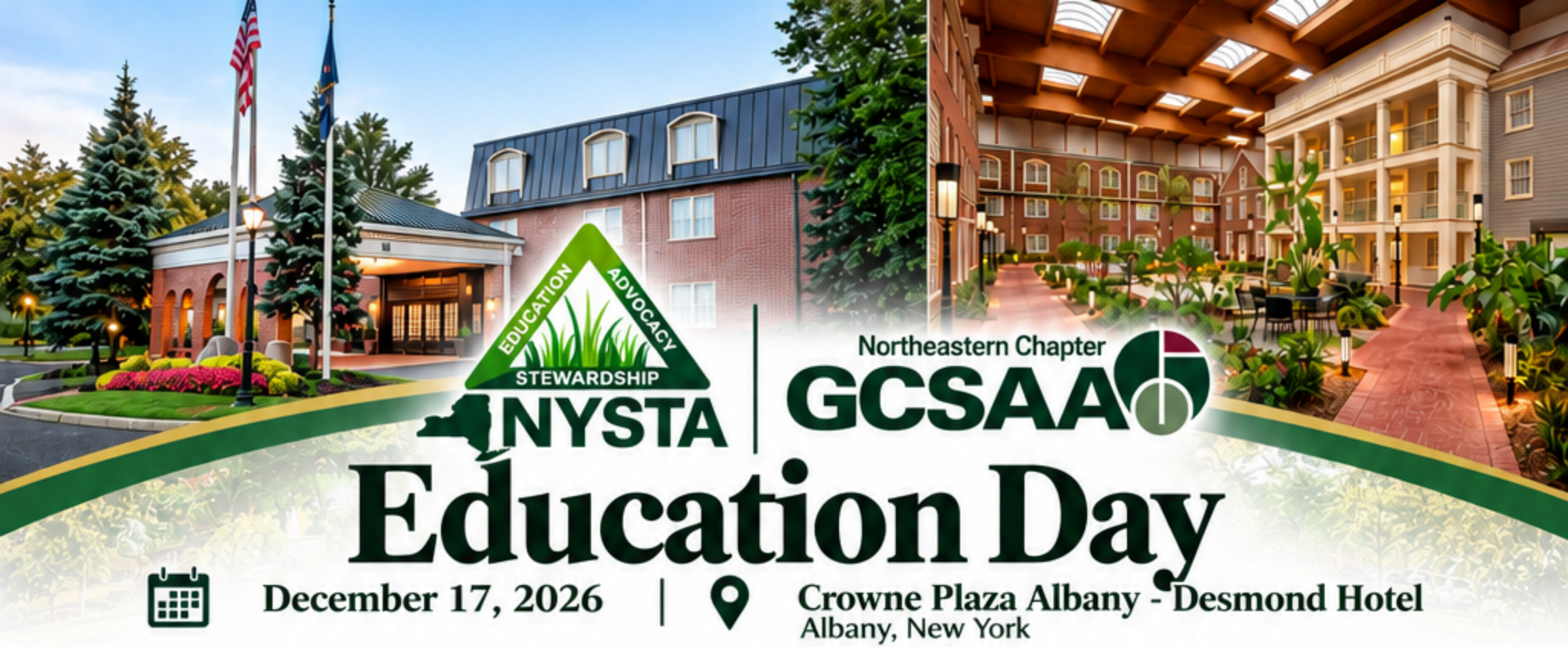




Education Day



December 17, 2026



Crowne Plaza Albany - Desmond Hotel
Albany, New York

SPONSORSHIP OPPORTUNITIES

\$1,800 Premier Sponsorship

- Multiple sponsorships available
- Company logo on all email announcements
- Verbal recognition on-site
- Company logo on sign displayed at registration
- Complimentary registration for three company representatives and booth
- One Complimentary NYSTA Individual Membership for 2027

\$1,300 Conference Sponsorship

- Multiple sponsorships available
- Company logo on all email announcements
- Verbal recognition on-site
- Company logo on sign displayed at registration
- Complimentary registration for two company representatives and booth

\$1,000 Speaker Sponsorship

- Multiple sponsorships available
- Company logo on all email announcements
- Verbal recognition on-site
- Company logo on on-site signage in education sessions
- Complimentary registration for one company representative and booth

\$1,000 Lunch or AM Break Sponsorship

- Multiple sponsorships available
- Company logo on all email announcements
- Verbal recognition on-site
- Company logo on on-site signage during lunch or AM break
- Complimentary registration for one company representative and booth

\$800 Supporter Sponsorship

- Multiple sponsorships available
- Verbal recognition on-site
- Company logo on on-site signage at registration

2026 Education Day - Sponsorship Form

Yes, I am interested in supporting Education Day at the following sponsorship level:

- | | |
|---|---|
| ☐ Premier Sponsorship - \$1,800 | ☐ Conference Sponsorship - \$1,300 |
| ☐ Speaker Sponsorship - \$1,000 | ☐ Lunch Sponsorship - \$1,000 |
| ☐ AM Break Sponsorship - \$1,000 | ☐ Supporter Sponsorship - \$800 |

Name: _____
Company: _____
Address: _____
Phone: _____ Fax: _____
Email: _____

Return this sponsorship form to:

New York State Turfgrass Association, PO Box 612, Latham, NY 12110
Phone: (518) 783-1229; Fax: (518) 783-1258 or Email: sue@nysta.mobi

Deadline for sign printing is December 7, 2026.

Please make checks payable to NYSTA or provide the following:

☐ VISA ☐ MasterCard ☐ AMEX

☐ **Please invoice me** (must also include email to send invoice to):
Email for invoice: _____

Signature: _____
Card Number: _____
Exp. Date: _____ CIN #: _____

Full Billing Address: _____

Email Address for Receipt: _____