



Sponsor Benefits

\$5,000- “Jackpot”

- Company name appears on all flyers/registration forms
- Prominent logo display throughout conference events/brochure
- Profile of your firm included in the conference program (*deadlines apply)
- Sponsor ribbon added to name tags for all registered employee/guests of “Jackpot” Sponsors
- One reserved table at the Friday or Saturday night dinner
- 12 months of full-page advertisements in Ditchmen magazine
- Live company introduction at Saturday night dinner
- One full registration and one full spouse registration at the conference
- Booth at Contractor's Day
- Attendance at all breakout sessions during Contractor's Day
- Company name listed on the NUCA of Florida Website as a “Jackpot” Sponsor

\$3,000- “High Roller”

- Company name appears on all flyers/registration forms
- Company's logo on pull-up banner provided by NUCA of Florida
- Logo on sponsor signage throughout event
- Company logo displayed on “Sponsors Page” in the NUCA of Florida Ditchmen for 6 months after the conference
- Profile of your firm included in the conference program (*deadlines apply)
- Sponsor ribbon added to name tags for all registered employee/guests of “High Roller” Sponsors
- One reserved table at the Friday or Saturday night dinners

\$1,500- “Full House”

- Sponsor signage at Friday and Saturday night dinners/events
- Company logo displayed on “Sponsors Page” in the NUCA of Florida Ditchmen for 6 months after the conference
- Included in conference brochure/program as “Full House” Sponsor

\$500- “Flush”

- Company logo displayed on “Sponsors Page” in the NUCA of Florida Ditchmen for 6 months after the conference
- Sponsor signage at conference and included in conference brochure as a “Flush” Sponsor

\$100 to \$250- “Straight”

- Name displayed on Sponsor board at registration desk



Sponsor Registration Form

☐ “Jackpot” Sponsor- \$5,000

☐ “High Roller” Sponsor- \$3,000

☐ “Full House” Sponsor- \$1,500

☐ “Flush” Sponsor- \$500

☐ “Straight” Sponsor- \$250

Company Name: _____

Contact Name: _____

Address: _____

City/State/Zip: _____

Email Address: _____

Phone Number: _____

Payment Method

☐ **Credit Card**

Name on Card _____

Card Number _____

Expiration Date _____

CVC Code _____

Billing Address _____

☐ Same as above

☐ **Check, mail to:**

NUCA of Florida
113 East College Avenue
Suite 200
Tallahassee, FL 32301

Contact Sydney Phillips at sphillips@wilsonmgmt.com or (850) 514-5183 with any questions.