

2026 IHA INVITATIONAL

TURNING STONE RESORT CASINO

SHENENDOAH GOLF COURSE

SPORTSPLEX PICKLEBALL COURTS



SCHEDULE OF EVENTS:

TUESDAY, SEPTEMBER 15, 2026

Registration & Lunch	12:15pm
Shotgun Start - Scramble Format	1:30pm
Round Robin & Free Play	1:30pm
Reception & Awards Dinner	6:00pm

AWARDS FOR:

1st Place, 2nd Place and pre-selected places.

CONTESTS INCLUDE:

\$10,000 Hole-in-One, Closest to Pin on par 3s,
Longest Drive, Straightest Drive

***Now with
pickleball!***

REGISTRATION:

IHA/UISS Hospital Member Golfer	\$225
Vendor Golfer	\$350
IHA/UISS Hospital Member Pickleball	\$50
Vendor Pickleball	\$70
Reception Only	\$125

Golf Fee includes: Greens fees for one round, golf cart, on course beverage and snacks, lunch, cocktail reception, awards dinner, generous door prizes, and more

Pickleball Fee includes: Reserved courts, necessary equipment, lunch, cocktail reception, awards dinner, generous door prizes, and more

Please direct all inquiries to Nicole Hooks at nhooks@iroquois.org or golf@iroquois.org.

SPONSORSHIP OPPORTUNITIES

Please click here to submit sponsorship selection and payment online.

If you would prefer to pay by check, please fill out the information below:

Supply Chain Symposium Presenting Sponsor (2 available) *includes twosome for golf and two cocktail reception/dinner tickets	\$2,000
Awards Dinner Sponsor *includes foursome for golf and four cocktail reception/dinner tickets	\$3,000
Awards Cocktail Reception Sponsor *includes twosome for golf and two cocktail reception/dinner tickets	\$2,250
Box Lunch Sponsor	\$1,750
Golf - Beverage Cart and Snacks Sponsor	\$1,750
Event Photography Sponsor	\$1,500
Hole-in-One Sponsor (2 available)	\$1,250
Closest to the Pin Sponsor	\$1,250
Longest Drive Sponsor	\$1,250
Straightest Drive Sponsor	\$1,250
Welcome Bag Sponsor	\$1,000
Pickleball Court Sponsor	\$1,000
Hole Sponsor (7 available)	\$750
Prize Sponsor	\$500
Giveaway Item Sponsor	\$500

SPONSORSHIP: _____ **TOTAL: \$**_____

CONTACT INFORMATION:

Company Name: _____

Contact Person: _____

E-mail Address: _____

Phone Number: _____

PAYMENT INFORMATION:

☐ Visa ☐ Mastercard ☐ AmEx ☐ Discover

Name on card: _____

Credit Card #: _____

Expiration Date: ____/____ **CCV:** _____

Please mail Sponsorship form and check made payable to:

Iroquois Healthcare Association Golf Tournament
15 Executive Park Drive, Clifton Park, NY 12065

Sponsorship forms paying by credit card can be emailed to **golf@iroquois.org**.

Sponsor Deadline: September 1, 2026