

Registration Form for February 5 and 6, 2026
CNLP Day, Horticulture 101 Day and Trade Show & Education Conference

Contact Name (Name to contact for questions about registration): _____

Company Name: _____

Address: _____

City, State, Zip: _____ Phone: _____

Email (Event updates and reminders will be emailed to this address): _____

Thursday Registration – February 5, 2026

CNLP Day recommended for CNLPs Arborists, Landscape Architects and CNLP Candidates)

CNLP Day: Please List All Names of Attendees for CNLP Day

Thursday Payment: CNLP Day Registration – Buffet lunch included
Number of Participants _____ at \$75 per person Total \$ _____

Hort 101 Day : Please List Names of All Attendees for Horticulture Day

**** PLEASE NOTE: FOR Basic First Aid class you must register with Heartsaver First Aid site here: <https://opfdems.enrollware.com/enroll?id=12695327>**
This is hands only – will not obtain a CPR card - can do CPR until EMS arrives

Thursday Payment: Horticulture 101 Day Registration - Buffet lunch included
Number of Participants _____ at \$75 per person Total \$ _____

Friday Registration - Trade Show & Education Conference – February 6, 2026
Please List Names of Attendees for Friday's Trade Show & Education Conference

Friday Registration Payment:

PLANT WNY Members and NYSNLA Registration (Dues must be current): Friday - Trade Show & Education Conference - buffet lunch included.
Group rate for 4 or more from the same company or organization.

Number of Participants _____ at \$90 per person Total \$ _____
Four or More from Same Company Number of Participants _____ at \$80 per person Total \$ _____

Non-Member Rate (not a dues paying member of PLANT WNY): Friday - Trade Show & Education Conference - buffet lunch included. Group rate for 4 or more from the same company or organization.

Number of Participants _____ at \$140 per person Total \$ _____
Four or More from Same Company Number of Participants _____ at \$130 per person Total \$ _____

CCE Master Gardener (must have status of Master Gardener): Friday - Trade Show & Education Conference - buffet lunch included.

Number of Participants _____ at \$105 per person* Total \$ _____
*(For Master Gardener's your discount is already included)

Grand Total: _____

Make check payable to PLANT WNY Foundation and Mail to: PO Box 712, East Amherst, NY 14051
Additional comments or information you would like to tell us:

Questions:(716) 741-8047