

ASSIGNMENT OF VOTE TO CHAPTER DELEGATE

Signing this form indicates that you are granting permission for your chapter delegate to attend the annual meeting and cast your individual vote as part of your chapter's voting block.

TO: GCSAA
Finance & Member Solutions Department
1421 Research Park Drive
Lawrence, KS 66049-3859
Fax: (785) 832-3643

I, _____, being a member in good standing of the _____ chapter of GCSAA, officially wish to advise GCSAA that I will vote with said chapter in forthcoming and subsequent elections at the GCSAA annual meeting.

I understand that this commitment will remain in effect until such time that I request a change in writing.

Signed: _____

Name: _____
(please print)

GCSAA Classification: _____

GCSAA Member Number: _____

Date: _____