



STUDENT MEMBERSHIP APPLICATION

1421 Research Park Drive • Lawrence, KS 66049-3859 • 785-841-2240 • 800-472-7878 • Fax: 785-832-3643

GCSAA student membership applicants must be students enrolled in a turfgrass or related course of education, or have completed his or her education less than one (1) year prior to the date of application for membership and have not become employed full-time at a golf course.

I. NAME OF APPLICANT

First _____ Middle _____ Last/Surname _____ Birthdate (MM/DD/YYYY) _____

2. ADDRESS INFORMATION

Preferred mailing address: Home School

Home Mailing Address:

Street	School Name
P.O. Box	School Address
City, Province/State, Zip/Postal Code	City, Province/State, Zip/Postal Code
Country	Country
Phone	Anticipated Graduation Date
Email	

Please check if you would like to receive GCSAA's Golf Course Management magazine (available to full student members only)

U.S. Citizen YES NO Lawful Permanent Resident

Publish E-mail address in the GCSAA Membership Directory? YES NO

3. GCSAA MEMBERSHIP CLASSIFICATION & ANNUAL DUES

Full Student Member: \$Free

Compliments of JOHN DEERE GOLF

Receive all member benefits, including association mailings, member discounts on educational programs and materials, full access to all areas of the GCSAA Web site and magazine.

Web-Only Student Member: \$Free

Receive all member benefits that can be accessed through the GCSAA Web site, in addition to member discounts on educational programs and materials.

4. DEGREE CURRENTLY SEEKING

- | | |
|--|---|
| <input type="checkbox"/> Bachelor's Degree in Turf/Plant Science | <input type="checkbox"/> Turf Certificate/Short Courses (400 hr. minimum) |
| <input type="checkbox"/> Other Bachelor's Degree Plus: Associate's Degree in Turf/Plant Science or 2-year Turf Certificate from 4-year Institution | <input type="checkbox"/> Other Associate's Degree |
| <input type="checkbox"/> Other Bachelor's Degree | <input type="checkbox"/> High School |
| <input type="checkbox"/> Associate's Turf/Plant Science Degree or 2-year Certificate from 4-year Institution | <input type="checkbox"/> No Degree or Recognized Certificate |

5. SIGNATURE

I hereby submit my application for membership in the Golf Course Superintendents Association of America and payment of my dues for one year in advance. It is estimated that 6% of my membership dues will be used for advocating positions on government issues, as well as for payment of term life insurance dues for all members, excluding student, affiliate company, facility, friend and any non-U.S. citizens. This estimated portion of the membership dues payment is therefore not tax deductible as a business expense. I have read and agree to abide by the GCSAA Code of Ethics (visit www.gcsaa.org/about-gcsaa/governance/member-code-of-ethics).

Signature: _____

Date: _____