

Pesticide License Affidavit

Return to:
GCSAA
Attn: Member Help Desk
1421 Research Park Dr
Lawrence, KS 66049-3859
Fax: (785) 832-3643

Pesticide License Number: _____

License issued by: _____
(i.e., state, province or country, etc)

License Expiration: _____

In signing this affidavit, I am hereby attesting that all information is correct and authorize GCSAA to make any inquiries deemed necessary for validation. I understand that falsification of this information breaches the GCSAA Code of Ethics and that GCSAA will be conducting random audits.

Note to Certified Golf Course Superintendents (CGCS):

If you are a certified golf course superintendent (CGCS) you must have recorded your pesticide license by July 1, 2008, or have taken the GCSAA IPM Exam. Meeting the pesticide requirement will then be required in all subsequent renewal cycles.

Name (please print)

Signature

Date

GCSAA Member #