

A confirmation will be sent within 10 business days of receipt of complete registration.

REGISTRATION FORM A-2

▶ (Forms A-1, A-2 and A-3 must be submitted together.)

ORLANDO 2008

Registrant A Information

GCSAA Member Number (if applicable) _____

 First Name Middle Initial Last Name ()
 Daytime Telephone Number

Demographics for Golf Course Management Professionals

1) What is your highest level of involvement in the purchasing process of your facility?

(Check only one box)

- Final decision-maker
- Significant influence on final decision
- Initial recommendation
- Provide information/research on products
- Not applicable

2) Please indicate which products you are most interested in seeing at the show.

(Check all that apply)

- Mowers/maintenance equipment
- Seed/sod
- Facility management
- Irrigation equipment and supplies
- Chemicals
- Golf cars/turf utility vehicles
- Golf course accessories
- Other, please specify: _____

3) What are your business objectives for attending the Golf Industry Show?

(Check all that apply)

- Seeking to purchase products
- Collecting information for a specific project
- Primarily visiting exhibits with new products
- Not necessarily purchase, but personally connect with vendor reps

4) Are you employed at a golf facility owned and/or operated by a management or maintenance company?

Yes No

If yes, please provide the name of the company: _____

5) Do you belong to either of the following organizations? (Check all that apply)

- National Golf Course Owners Association
- Club Managers Association of America

Seminar Selections

Write the codes for your selections from the Seminar Reference Guide (page 48) in the space provided. Because seminars tend to fill quickly, please select one 1st, 2nd and 3rd choice for each day you would like to attend.

		1ST CHOICE	2ND CHOICE	3RD CHOICE	FEES*			1ST CHOICE	2ND CHOICE	3RD CHOICE	FEES*
TWO-DAY	Mon. & Tue.	_____	_____	_____	_____	HALF-DAY	Mon. am	_____	_____	_____	_____
	Wed. & Thur.	_____	_____	_____	_____		Mon. pm	_____	_____	_____	_____
ONE-AND A-HALF-DAY	Mon. & Tue.	_____	_____	_____	_____	Tue. am	_____	_____	_____	_____	
	ONE-DAY	Monday	_____	_____	_____	_____	Tue. pm	_____	_____	_____	_____
Tuesday		_____	_____	_____	_____	Wed. am	_____	_____	_____	_____	
Wednesday		_____	_____	_____	_____	Wed. pm	_____	_____	_____	_____	
Thursday		_____	_____	_____	_____	Thur. pm	_____	_____	_____	_____	
SIX-HOUR	Monday	_____	_____	_____	_____	Fri. am	_____	_____	_____	_____	
	Tuesday	_____	_____	_____	_____	Fri. pm	_____	_____	_____	_____	
	Wednesday	_____	_____	_____	_____	Sat. am	_____	_____	_____	_____	
	Thursday	_____	_____	_____	_____						

* Calculate amount based on prices of 1st choices. **SEMINAR TOTAL \$** _____

Other Educational Events

- | | |
|--|-----------------------------|
| <input type="checkbox"/> 3102 GCSAA Integrated Pest Management (IPM) Exam (see page 10 for details)
1 pm, Friday, Feb. 1 | FEES
\$ 40 |
| <input type="checkbox"/> 4101 14th Annual Collegiate Turf Bowl Competition (see page 9 for details)
8 – 11:30 am, Friday, Feb. 1 | COMP. |
| <input type="checkbox"/> 4102 Student/Superintendent Employment Fair and Networking Reception (see page 10 for details)
5 – 6 pm, Friday, Feb. 1 | COMP. |

EDUCATIONAL EVENT FEES TOTAL \$ _____

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