

Give this to a peer, get them to join GCSAA and you both win.

You get a \$50 GCSAA Gift Certificate and your peer gets a one-time full package registration to the GIS (\$450 value) along with the membership benefits described below.



THE REWARDS OF JOINING

GCSAA



It takes a real professional to stay ahead of all the demands needed to keep a golf course and its equipment in top shape. You also have to keep up with changes in the industry, new technologies and mechanical innovations. That's why golf course superintendents, assistants and equipment managers all join the GCSAA for support that can make their jobs easier and more rewarding.

EXPAND YOUR KNOWLEDGE

- Free one-time full package registration to the Golf Industry Show (\$450+ value)
- Unlimited free access to all of GCSAA's industry-leading webinars**
- Professional certificate programs to test your skills and advance your career
- Scholarship funds for educational training

**Free educational webinars valued at more than \$700 annually.

ADVANCE YOUR CAREER

- Free access to GCSAA Job Board
- Personalized career coaching services
- Free entry to many professional golf events
- Opportunity to serve on GCSAA Task Group

CONNECT WITH EXPERTS

- Online discussion forums to connect with peers across the globe
- Networking tools and membership directory
- Field staff representatives to strengthen ties to local chapters

SINCE 1926 *The Golf Course Superintendents Association of America is the top professional association for the men and women who manage golf courses in the USA and worldwide.*



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MEMBER-GET-A-MEMBER APPLICATION

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

*MUST NOT HAVE BEEN A GCSAA MEMBER FOR THE PREVIOUS 12 MONTHS

*REFERRING MEMBER WILL RECEIVE A \$50 GCSAA GIFT CERTIFICATE FOR EACH NEW MEMBER FOR USE IN THE GCSAA STORE, GIS REGISTRATION AND DUES

I. NAME OF APPLICANT

First _____ Middle _____ Last/Surname _____

2. ADDRESS INFORMATION

Home Mailing Address: _____
 Street _____
 P.O. Box _____
 City, Province/State, Zip/Postal Code _____ Country _____
 Phone _____ Fax _____
 E-mail _____
 U.S. Citizen YES NO Lawful Permanent Resident
 PUBLISH E-mail address in the GCSAA Membership Directory? YES NO

Preferred mailing address:
 Home Business

Job Title: _____

Business Name _____
 Business Address _____
 City, Province/State, Zip/Postal Code _____ Country _____
 Phone _____ Fax _____
 Date of Birth _____

Please check if you would like to receive GCSAA's *Golf Course Management* magazine.

3. GCSAA MEMBERSHIP CLASSIFICATION & ANNUAL DUES

Please check the appropriate box below.

Superintendent (B): \$380 Affiliate Individual (AF): \$380 Educator (E): \$65
 Assistant Superintendent (C): \$195 Affiliate Company (AFC): \$380 Associate (AS): \$100
 International Superintendent Member (ISM): \$195 Equipment Manager (EM): \$95

4. CHAPTER MEMBERSHIP REQUIREMENT required for Superintendent membership (B)

To apply for superintendent membership, you must also belong to a GCSAA affiliated chapter. Please provide the name of the chapter to which you belong:

Your vote will automatically be assigned to your chapter, unless marked individual. Individual

If you do not currently belong to a chapter, please submit your application and visit www.gcsaa.org for a complete list of chapters. A chapter representative can give you an affidavit of your intent to join to complete your application.

5. ISM MEMBERSHIP REQUIREMENT required for International Superintendent Member (ISM)

All applicants for International Superintendent Member are required to be a member of the nations/country superintendent/greenkeeper organization.

Name of nations/country organization: _____ Member number: _____

6. INSURANCE

As a benefit of your membership, all members (excluding students, affiliate companies, technical assistance network and non-U.S. citizens) are automatically enrolled in the dues term life insurance program. If a beneficiary is not named, state law will govern distribution of funds.

Name of Beneficiary: _____ Relation to Member: _____
 Please print first and last name (e.g., "Mary Smith," not "Mrs. J. Smith" or "Mrs. John Smith").

7. METHOD OF PAYMENT

A. Visa MasterCard American Express Card No. _____ - _____ - _____ - _____ Exp. Date ____/____/20 ____

Card Holder (Please print): _____ Signature: _____

B. Check Enclosed (U.S. dollars drawn on U.S. bank only) Remit to: GCSAA • 1421 Research Park Drive • Lawrence, KS 66049

8. MEMBER-GET-A-MEMBER

Signature: _____ Name Printed: _____ Date: _____ Member Number: _____

9. SIGNATURE

I hereby submit my application for membership in the Golf Course Superintendents Association of America and attach 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, technical assistance network and non-U.S. citizens, and that a portion 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.aspx).

Signature: _____ Date: _____ BM MGM