

Classification \_\_\_\_\_ Date accepted by Board of Directors \_\_\_\_\_ Date accepted check \_\_\_\_\_

## CENTRAL PENNSYLVANIA GOLF COURSE SUPERINTENDENTS ASSOCIATION

I hereby apply for membership in the **Central Pennsylvania Golf Course Superintendents Association**, an affiliate of the **Golf Course Superintendents Association Of America**. Membership in the GCSAA is mandatory for Class A and SM members and recommended for all other classifications.

Enclosed is my application fee of       \$50.00       **(Dues will be billed upon acceptance and classification.)**

NAME \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ FAX \_\_\_\_\_

DATE JOINED GCSAA \_\_\_\_\_ GCSAA# & CLASSIFICATION \_\_\_\_\_ PESTICIDE LICENSE # \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ SPOUSE'S NAME \_\_\_\_\_ E-MAIL \_\_\_\_\_

EMPLOYER \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY & STATE \_\_\_\_\_ ZIP \_\_\_\_\_ WORK PHONE \_\_\_\_\_

(1) State your present position: \_\_\_\_\_ If, superintendent, Certified? \_\_\_\_\_

(2) How long have you been at this position?

(3) Summarize your previous golf course experience:

(4) List any turf organizations you are or were associated with:

(5) List your educational background:

(6) Briefly explain why you would like to join **Central Pennsylvania GCSA**:

(7) How many **Central Pennsylvania GCSA** meetings would you estimate you would be attending throughout the year?

(8) Check category of membership you are applying for:

- Superintendent                       Assistant                       Course Employee                       Owner
- Commercial - Type of Business \_\_\_\_\_

I do hereby acknowledge that this information must be reviewed by the Membership Committee and the Board of Directors. If accepted I pledge to participate actively in all Association functions and to serve the Association whenever called upon. I do also pledge to observe the By-Laws and Code of Ethics of the **Central Pennsylvania Golf Course Superintendents Association** and the **Golf Course Superintendents Association of America** and conduct myself as a professional at all times.

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

**Must be attested by Class A Members:**

Attestor \_\_\_\_\_ Attestor \_\_\_\_\_

Club \_\_\_\_\_ Club \_\_\_\_\_

Applicants will not be accepted unless completed in full. Enclose check or money order (no cash) payable to CPGCSA and send to:

CPGCSA  
1594 Cumberland Street #250  
Lebanon, PA 17042-4532

Revised 6/10