



MEMBERSHIP APPLICATION

NAME: \_\_\_\_\_ SPOUSE'S NAME: \_\_\_\_\_
NAME OF CLUB/BUSINESS: \_\_\_\_\_
PRESENT POSITION/TITLE: \_\_\_\_\_
BUSINESS MAILING ADDRESS: \_\_\_\_\_
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_
BUSINESS PHONE #: \_\_\_\_\_ - \_\_\_\_\_ FAX #: \_\_\_\_\_ - \_\_\_\_\_
HOME MAILING ADDRESS: \_\_\_\_\_
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_
HOME PHONE #: \_\_\_\_\_ - \_\_\_\_\_ MOBILE #: \_\_\_\_\_ - \_\_\_\_\_
PREFERRED MAILING ADDRESS: HOME \_\_\_\_ BUSINESS \_\_\_\_ PREFERRED PHONE #: HOME \_\_\_\_ BUSINESS \_\_\_\_ MOBILE \_\_\_\_
E-MAIL: \_\_\_\_\_ WEB SITE: \_\_\_\_\_
BIRTH DATE: \_\_\_\_\_ GCSAA CLASS AND MEMBER #: \_\_\_\_\_

- \_\_\_\_ YEARS AS A SUPERINTENDENT ON PRESENT COURSE
\_\_\_\_ YEARS AS A SUPERINTENDENT ON ANY GOLF COURSE
\_\_\_\_ YEARS AS AN ASSISTANT SUPERINTENDENT ON PRESENT COURSE
\_\_\_\_ YEARS AS AN ASSISTANT SUPERINTENDENT ON ANY GOLF COURSE
\_\_\_\_ NUMBER OF HOLES ON GOLF COURSE (APPLIES TO SUPERINTENDENTS/ASSISTANT SUPERINTENDENTS)
\_\_\_\_ YEARS WORKED IN TURFGRASS INDUSTRY
\_\_\_\_ YEARS AS AN EDUCATOR
\_\_\_\_ YEARS AS A STUDENT (APPLIES TO STUDENTS CURRENTLY ENROLLED IN FORMAL TURFGRASS EDUCATION)

ANNUAL DUES ENCLOSED: \*A 5% credit card processing fee will be added to all credit card charges

CLASS A \* (SUPERINTENDENTS WITH AT LEAST 3 YEARS EXPERIENCE) - \$70.00
CLASS SM \* (SUPERINTENDENTS WITH LESS THAN 3 YEARS EXPERIENCE) - \$70.00
CLASS C (ASSISTANT SUPERINTENDENTS) - \$70.00
CLASS AF MEMBER (COMMERCIAL) - \$70.00
CLASS AS MEMBER (ASSOCIATE) - \$70.00
CLASS E MEMBER (EDUCATOR) - \$70.00
CLASS R MEMBER (RETIRED) - \$70.00
CLASS S MEMBER (STUDENT ENROLLED IN FORMAL TURFGRASS EDUCATION) - \$25.00
\* DUAL MEMBERSHIP REQUIREMENT: All applicants for Class A or SM membership must also be a member of GCSAA.
TOTAL AMOUNT ENCLOSED \$\_\_\_\_\_

CASH \_\_\_\_ CHECK \_\_\_\_ CREDIT CARD (circle type) MASTERCARD / VISA / DISCOVER / AMEX
CARDHOLDER'S NAME \_\_\_\_\_ CARD NUMBER \_\_\_\_\_ EXP. DATE \_\_\_\_\_
CVV NUMBER \_\_\_\_\_ CARDHOLDER'S NUMERIC ADDRESS \_\_\_\_\_ CARDHOLDER'S ZIP CODE \_\_\_\_\_
\*A 5% credit card processing fee will be added to all credit card charges

FOR MORE INFORMATION, CALL (432) 524-2003.

MAIL TO: WTGCSA
908 N.W. 12th Place
Andrews, Texas 79714

APPLICANT'S SIGNATURE
DATE OF APPLICATION

OR FAX TO: 888-908-5679