

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 B 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 _____ MOBILE _____

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
1314 Porter Avenue
Scranton, PA 18504

Revised 6/2023