

**2024 Membership Renewal Invoice**  
**Class A, B, Facility, C, GE, Student & AS**  
**Golf Course Personnel**

Thank you for renewing your membership with  
Cactus & Pine, GCSA. Please contact us with any  
questions: [Carmella@cactusandpine.com](mailto:Carmella@cactusandpine.com)  
Visit our website at [www.cactusandpine.com](http://www.cactusandpine.com)



Credit Cards (Master Card, Visa & AMEX) Accepted for payment. If  
payment by check, please make payable to Cactus & Pine, GCSA

**Membership Dues for Year 2024**

- ☐ **Class A Superintendent (More Than 3 years)**  
or  
☐ **Class B Superintendent (Less Than 3 years)**  
or  
☐ **Facility Membership**
- ☐ **Class C Assistant Superintendent** **\$250.00**  
☐ **NEW MEMBER Class C Assistant Superintendent**  
**First Year:** **\$75.00**  
☐ **Mechanic, Irrigation, Spray Tech** **\$100.00**  
☐ **General or Associate** **\$150.00**  
☐ **Student** **\$ 25.00**

**ALL INCLUSIVE MEMBERSHIPS: SEMINARS, GOLF & EVENTS**

- ☐ **Class A/B** **\$625.00**  
☐ **Class C** **\$525.00**

- I am a Certified GC Superintendent. Yes \_\_\_ No \_\_\_
- GCSAA Number: \_\_\_\_\_
- Office of Pest Management Number: \_\_\_\_\_
- Arizona Department of Agriculture #: \_\_\_\_\_
- Water Source: \_\_\_\_\_
- Type of Club/Course: ☐ Private ☐ Semi ☐ Public
- Type of grass on my course:  
Greens: \_\_\_\_\_ Fairways: \_\_\_\_\_
- Do you Overseed? Yes: \_\_\_ No: \_\_\_ Roughs: Y \_\_\_ N \_\_\_
- I am interested in serving on the following  
Committee(s) (Please Choose)  
☐ Education ☐ Government Relations  
☐ Membership ☐ Fundraising  
☐ Scholarship/Research ☐ Publications/PR  
☐ Serving on the Board of Directors

Office Use Only

Received: \_\_\_/\_\_\_/\_\_\_ Amt: \$ \_\_\_\_\_

Check # \_\_\_\_\_ Credit Card \_\_\_\_\_

Database: \_\_\_\_\_

**Information :**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Name of Golf Course / Company \_\_\_\_\_

Street or P.O. Box Number \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Work #: \_\_\_\_\_ Work Fax #: \_\_\_\_\_

Cell #: \_\_\_\_\_ (DO NOT LIST:) \_\_\_\_\_

Email Address: \_\_\_\_\_

Information Preferred by: *E-MAIL* \_\_\_ *TEXT* \_\_\_

*I hereby authorize Cactus & Pine to send me  
Information by Text and/or email:*

**Your signature required**

Name of Spouse: \_\_\_\_\_ Children: \_\_\_\_\_

Golf Handicap: \_\_\_\_\_  
Birth Date: \_\_\_/\_\_\_/\_\_\_  
Shirt Size: \_\_\_\_\_

**PAYMENT INFORMATION:**

CHECK: \_\_\_\_\_

CREDIT CARD: MC \_\_\_ VISA \_\_\_ AMEX \_\_\_

Exp Date: \_\_\_/\_\_\_/\_\_\_ 3 or 4 Digit Code: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Credit Card #: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_