

2024 Sponsorship Levels &  
Membership Renewal Invoice  
Class AF-1 & AF-2

Affiliate Primary & Secondary Member

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)



4700 E. Thomas Road ~ Suite 108 ~  
Phoenix, AZ 85018 ~ Office: 480-609-6778 ~  
Cell: 480-600-3786

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

**Information :**

**2024 Sponsorship Levels**

- |  |            |
|--|------------|
| <input type="checkbox"/> Platinum Level Member | \$6,000.00 |
| <input type="checkbox"/> Gold Level Member     | \$4,000.00 |
| <input type="checkbox"/> Silver Level Member   | \$2,000.00 |
| <input type="checkbox"/> Bronze Level Member   | \$1,000.00 |
| <input type="checkbox"/> Copper Level Member   | \$ 600.00  |

**Membership Only**

- |  |           |
|--|-----------|
| <input type="checkbox"/> AF-1 Affiliate Primary Member   | \$ 275.00 |
| OR   |           |
| <input type="checkbox"/> *All-Inclusive AF-1 Membership  | \$ 650.00 |
|  |           |
| <input type="checkbox"/> AF-2 Affiliate Secondary Member | \$ 125.00 |
| OR   |           |
| <input type="checkbox"/> *All-Inclusive AF-2 Membership  | \$ 500.00 |

\* All-Inclusive Memberships Include:  
All 2024 Cactus & Pine Seminars, Golf & Events

- Department of Agriculture #: \_\_\_\_\_
- QP/OPM Number: \_\_\_\_\_
- I am interested in serving on the following Committee(s) (Please Choose)
  - ☐ Education ☐ Government Relations
  - ☐ Membership ☐ Fundraising
  - ☐ Scholarship/Research ☐ Publications/PR
  - ☐ Affiliate Liaison Board Member

Office Use Only

Received: \_\_\_/\_\_\_/\_\_\_ Amt: \$ \_\_\_\_\_  
Check # \_\_\_\_\_  
Credit Card: \_\_\_\_\_  
Database: \_\_\_\_\_

Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Company Name: \_\_\_\_\_  
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: \_\_\_\_\_