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The Cactus and Pine Golf Course Superintendents Association is dedicated to enhancing the professional recognition of its Members through education, leadership, collaboration, government relations and environmental stewardship. Thank you for renewing your Membership with Cactus and Pine, GCSA. Please contact us if you have any questions or visit our website at www.cactusandpine.com

1. NAME OF APPLICANT:		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
<div style="display: flex; justify-content: space-between; border-top: 1px solid black; padding-top: 5px;"> Prefix First Middle (Optional) Last/Surname </div>			

2. ADDRESS INFORMATION:		Preferred Mailing address: <input type="checkbox"/> Home <input type="checkbox"/> Business	
Home Address		Job Title	
City, Province/State, Zip/Postal Code		Business Name	
E-mails:		Business Address	
Publish E-mails in the Cactus & Pine, GCSA Membership Directory? Yes <input type="checkbox"/> No <input type="checkbox"/>		<div style="display: flex; justify-content: space-between; border-top: 1px solid black; padding-top: 5px;"> City State Zip </div>	
		Phone: Work <input type="checkbox"/> Home <input type="checkbox"/> Mobile <input type="checkbox"/> DO NOT PUBLISH <input type="checkbox"/> Golf Handicap: _____ Date of Birth: ____/____/____	

3. CACTUS & PINE, GCSA SPONSORSHIP CLASSIFICATION:		
<input type="checkbox"/> PLATINUM LEVEL SPONSOR	\$ 6,200.00	OPM Number _____ ADA Number _____ Committee Interest: _____ Affiliate Board of Director Interest: _____
<input type="checkbox"/> GOLD LEVEL SPONSOR	\$ 4,150.00	
<input type="checkbox"/> SILVER LEVEL SPONSOR	\$ 2,150.00	
<input type="checkbox"/> BRONZE LEVEL SPONSOR	\$ 1,150.00	
<input type="checkbox"/> COPPER LEVEL SPONSOR	\$ 650.00	
4. CACTUS & PINE, GCSA MEMBERSHIP ONLY: ANNUAL DUES		
<input type="checkbox"/> AF-1 Affiliate Primary Company Member	\$300.00	<input type="checkbox"/> All Inclusive AF-1 Membership/Seminars/Golf \$750.00
<input type="checkbox"/> AF-2 Secondary Company Member	\$150.00	<input type="checkbox"/> All Inclusive AF-2 Membership/Seminars/Golf \$650.00

5. COMPANY INFORMATION: SALES	
<input type="checkbox"/> Equipment: Type: _____	<input type="checkbox"/> Services: _____
<input type="checkbox"/> Products: Type: _____	

6. METHOD OF PAYMENT	
<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express Card No. _____ Expiration Date: ____/____/20____ 3 or 4 Digit Code: _____	
Card Holder (Please print): _____ Signature: _____	
Billing Address: _____ City: _____ State: _____ Billing Zip Code: _____	
<input type="checkbox"/> Check Enclosed Check #: _____ *Please Make Checks Payable to Cactus & Pine, GCSA*	

I hereby submit my application for membership in the Cactus and Pine Golf Course Superintendents Association and payment of my dues for one year in advance.
 I have read and agree to abide by the GCSAA Code of Ethics (visit www.gcsaa.org/about-gcsaa/governance/member-code-of-ethics).

Signature: _____ Date: _____

Office Use Only: Received: ____/____/____ Amount Paid: \$ _____ Credit Card: _____ Check: _____ Database: _____