

## POCONO TURFGRASS ASSOCIATION

309 TERRACE AVENUE, HARDING, PA 18643 570-388-2167



## MEMBERSHIP APPLICATION

## 1. Application Instructions

**A**. Fill out form <u>completely</u>. **B**. Have two (2) PTGA Class A or B Members sign application. **C**. Sign and date where indicated. **D**. Enclose check for full year's dues (see dues structure below, checks payable to PTGA) **E**. Mail to address above.

## 2. Complete ALL Information – Please Print

First	Middle Initial	Last	Golf Course/Company			
Home Address			Office Address			
City	State	Zip	City	State	Zip	
Home Phone (optiona	al) E-Mail Addre	255	Work Phone	Fax		
Preferred mailing a	ddress (check one)	lome Work	Significant Other (name)			
GCSAA Member # Class		Class	Certified (CGCS) Yes No			
			nembers of the PTGA must als six months of being accepted	-		
3. Employment Hist	tory					
			Current Title			
Past Positions: From (yr to yr)			Employment	City & State		
	MUST be PTGA Cla	ss A or SM member				
Name (print)		Signature	Date		SAA #	
Applicant's Signature			Date			
Classification/Dues Structure – Check one A – Superintendent 3 years or more (\$75) B – Superintendent less than 3 years (\$75) C – Assistant Superintendent (\$65) D – Golf Course Employee (\$65) AS – Associate or related field (\$95) AF – Affiliate or Commercial (\$95) S – Student (\$25) NR – Non Resident (\$35)			Dues Received \$ Check # Issued by Membership effective d Membership Chairman Approved by (print)	OFFICE USE ONLY   Classification   Dues Received \$ Date   Check # Date   Issued by   Membership effective date   Membership Chairman   Approved by (print)   Signature:		