



# MEMBERSHIP APPLICATION FORM

**PEAKS & PRAIRIES GCSA**  
**P.O. Box 807, Lolo, MT 59847**  
**Tele/Fax: 406-273-0791 www.ppgcsa.org**  
**lori@ppgcsa.org**

## Section I

**Please type or print clearly**

Name of Applicant/Primary Member _____	<b>For Office Use Only:</b>
Course/Company Name _____	<b>Date Received:</b>
Office Mailing Address _____	<b>Memb. Number:</b>
City, State, Zip _____	<b>Payment</b>
Office / Shop Phone: (____) _____ - _____	Date Started Present Position _____
Office / Shop Fax: (____) _____ - _____	<b>Title of Position:</b> _____
Office/ Shop Toll Free: (____) _____ - _____	<b>E-mail address:</b> _____
Cell/Mobile : (____) _____ - _____	<b>Type of Course:</b> _____ <b>Number of Holes</b> _____

**I would prefer to receive all mailings at my:** Home Address \_\_\_\_\_ Office Address \_\_\_\_\_

Are you a licensed pesticide applicator? \_\_\_\_\_ Yes \_\_\_\_\_ No Pesticide License Expiration Date \_\_\_\_\_

**Are you a member of GCSAA?** \_\_\_\_\_ **GCSAA Class & Membership Number:** \_\_\_\_\_

Are you a GCSAA Certified Superintendent? \_\_\_\_\_ Yes \_\_\_\_\_ No Next Recertification Date \_\_\_\_\_

**Past Positions Held (Do NOT Include Present Position):**

From	To	Place of	City &	Job
Mo. & Yr.	Mo. & Yr.	Employment	State	Title

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Home Mailing Address \_\_\_\_\_

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

Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Spouse's Name \_\_\_\_\_

**Class**

<b>AA</b> (Charter)	\$100
<b>A</b> (Superintendent 3 years & over)	\$100
<b>SM</b> (Superintendent less than 3 years)	\$100
<b>C</b> (Assistant Superintendent)	\$100
<b>FM</b> (Facility Membership as defined in bylaws)	\$100
<b>JS</b> *Job Service Only	\$ 45

(Included in above classifications)

Please complete Section I. IV

**Class**

<b>D</b> (Allied/Commercial/Supplier)	\$ 115
*Please complete Section I, II, IV	
<b>E</b> (Student - requires signature)	\$ 30
*Please complete Section I, III, IV	
<b>F</b> (Professor / Former Class A, SM, or C member / Interested in in Turf Mgt / Course employees other than supers & assistants)	\$ 50

Please complete Section I. IV

