



Canadian Golf Superintendents Association (CGSA)

To apply for membership online please visit: www.golfsupers.com

FAX Completed form to: 416-626-1958 ~ EMAIL: Lori Micucci at: lmicucci@golfsupers.com

No application will be considered without dues enclosed or valid credit card information.

Questions: Contact Lori Micucci at: 1-800-387-1056/416-626-8873, ext. 27, or lmicucci@golfsupers.com

MEMBERSHIP YEAR RUNS FROM JULY 1 - JUNE 30

Canada's anti-spam legislation (CASL) became effective July 1, 2017. By including your e-mail address, you agree to receive electronic messages from the CGSA

2024-2025 CGSA MEMBERSHIP APPLICATION FORM

PLEASE COMPLETE THIS APPLICATION AND CHECK PREFERRED MAILING ADDRESS

Full Name:								
Employer/School:			Position:					
Business Address:								
City:			Province:			PC:		
Home Address:								
City:			Province:			PC:		
Check Preferred Mailing <input type="checkbox"/> :		Business: <input type="checkbox"/>		Home: <input type="checkbox"/>				
Business Tel:			Home Tel:			Cell:		
E-Mail Address: <input type="checkbox"/> *		<input type="checkbox"/> *						
Pesticide License Number:				Expiry Date MM/DD/YY:				
Birthdate: MM/DD/YY			Student's to Complete Graduation Date:		MM/DD/YY:			
Date of Application MM/DD/YY			Signature of Applicant:					
Who Referred You to CGSA?		Member's Name:						

CGSA MEMBERSHIP CATEGORIES & RATES:		*2024-2025 MEMBERSHIP FEES
NOTE: * SUPERINTENDENT & * ASSISTANT MEMBERS MUST FILL IN THEIR PESTICIDE LICENSE NUMBER AND EXPIRY DATE ABOVE		Membership from July 1, 2024 – June 30, 2025
MEMBERSHIP CATEGORIES	Category Description	APPLICATBLE TAX APPLIES TO ALL MEMBERS GST/HST# 100765106 ~ QST #1223912041
* SUPERINTENDENT: <small>Must complete Pesticide Information above</small>	Must be in the position of superintendent with full and complete responsibility for the day to day maintenance and operation of the golf course.	\$472.00 Plus Tax (by Province)
GOLF COURSE MANAGEMENT:	Must have at least 5 years as a golf course superintendent, having been in full and complete control of the day to day maintenance and operation of a golf course and who has moved on to assume another senior management position.	\$472.00 Plus Tax (by Province)
* ASSISTANT SUPERINTENDENT: <small>Must complete Pesticide Information above</small>	Must currently hold the position of assistant superintendent at a golf course.	\$376.00 Plus Tax (by Province)
GOLF COURSE MAINTENANCE:	Must currently be a staff member on a golf course who does not qualify under any of the other membership categories.	\$285.00 Plus Tax (by Province)
GOLF EQUIPMENT TECHNICIAN:	Must currently hold the position of golf equipment technician at a golf course.	\$376.00 Plus Tax (by Province)
ASSOCIATE:	Must be one who is sufficiently interested in the profession of turf-growing and management to work for the benefit of the Association.	\$445.00 Plus Tax (by Province)
INDUSTRY AFFILIATE:	Must be doing business in the turfgrass industry and is the primary member.	\$598.00 Plus Tax (by Province)
INDUSTRY AFFILIATE 2:	Employees from the same company may join <u>after</u> the primary industry member	\$175.00 Plus Tax (by Province)
STUDENT: FREE to those who qualify!	Must be enrolled as a full-time student in a turfgrass program approved by the Board of Directors (Students can maintain their classification for one year after graduating).	\$38.00 FREE (by Province)
NEW CGSA Club Membership Please complete the form here: https://golfsupers.com/Club_Membership_Request.html	The new Club Membership option will be offered at \$1,175 and includes a Superintendent, Assistant and Equipment Technician memberships OR any combination of those categories. Additional members are available for only \$125; except for students who will continue to benefit from complimentary membership while in school.	\$1,175.00 Plus Tax (by Province) Additional members from same club are available for only \$125.00 Plus Tax (by Province)

ADD: MEMBERSHIP PLAQUE	ADD: \$80.00 PLUS TAX (BY PROVINCE) \$
ADD: HUMANACARE – Member & Family Assistance Program	ADD: \$40.00 INCLUDES TAX \$

PAYMENT INFORMATION:					
CHEQUE #	MASTERCARD		AMEX		VISA
NAME ON CARD:					
CARD #					
EXPIRY:	MM		YYYY		
CVV SECURITY NUMBERS (BACK OF CARD)					
POSTAL CODE (CONNECTED TO CARD)					
SIGNATURE:					