

**APPLICATION FOR MEMBERSHIP- YEAR ENDING SEPTEMBER 30, 2010**  
**TO BE COMPLETED AFTER READING THE OGSA BY-LAWS**

I hereby make application for membership in the OGSA:

Name _____	Club or Business _____
Home Address _____	Address _____
City _____ Prov. _____ P.C. _____	City _____ Prov. _____ P.C. _____
Home Phone (_____) _____	Business Phone (_____) _____ Ext _____
Mail to be sent to: _ home address _ business address	Fax Number: (_____) _____
Email _____	Club's Website: _____
Present Position _____	Start Date: _____
Positions held prior to current employment:	
From _____ To _____ Title _____ Place _____	
From _____ To _____ Title _____ Place _____	
From _____ To _____ Title _____ Place _____	
What is your formal education related to turf _____	
Are you an owner? (yes)_____ (no)_____ If so, do you employ a Superintendent? (yes)_____ (no)_____	

<p><b>FOR ASSOCIATE APPLICANTS ONLY:</b> State number of years in the business _____</p> <p><b>State three golf clubs you have done business with:</b> (1) _____</p> <p>(2) _____ (3) _____</p> <p>A firm may have more than one representative belonging to the Association at an additional fee of <b>\$133.34</b> (\$118.00 + \$15.34 hst )</p> <p><b>Please list their name &amp; e-mail address:</b></p> <p>Name: _____ E-Mail: _____</p>
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EACH APPLICATION MUST BE SIGNED BY ONE CLASS "A" MEMBER OF THE OGSA AND YOUR COURSE SUPERVISOR

Attested by _____	_____
print name	signature
Attested by _____	_____
print name	signature

**OGSA Classifications AA, A, Supt & C require a PHOTOCOPY of Landscape Exterminator's Licence to be submitted with application**

Ontario Landscape Exterminator's Licence # 70-02- \_\_\_\_\_ or other : \_\_\_\_\_

ATTACHED ARE MY DUES OF:

<b>Class A, AA, Supt, D</b> .....	<b>\$186.45</b> (\$165.00 + \$21.45 hst)
<b>Class C</b> Assist. Super., <b>Class F.</b> Technician .....	<b>\$129.95</b> (\$115.00 + \$14.95 hst)
<b>Class S</b> Student .....	<b>\$ 93.79</b> (\$ 83.00 + \$10.79 hst)
<b>Class E</b> , Associate/Company .....	<b>\$302.84</b> (\$268.00 + \$34.84 hst)

**I AM PAYING BY:**

Cheque (enclosed)

Visa/Master Card Expiry Date \_\_\_\_\_

**Note: these rates are in effect for membership year 2009-2010 only** # \_\_\_\_\_  
**US residents add \$15. International members add \$20**

\_\_\_\_\_  
Signature of Applicant DATE \_\_\_\_\_

