

**Southern Illinois Golf Course
Superintendents Association
Membership Application**

Name: _____ Date: _____

Course/Company: _____

Work Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Cell: _____ Fax: _____

Current Position: _____

Course/Company Website Address: _____

Email address: _____

[SIGCSA Directory will list the work information only]

Visit www.sigcsa.com

Home Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Send mailings to: Home _____ or Work _____

Joint Membership with GCSAA is required for new members in Class A and Class SM only.

Are you a GCSAA member? Yes No GCSAA Membership# _____

Membership Type (circle one)

- A** Supt. for 3yrs. or more - \$60
- SM** (formerly Class B) Supt. for less than 3 yrs. - \$60
- C** Assistant Supt. - \$45
- AF** Affiliate (Sales, Manufacture Rep., Business Owners, etc.) - \$175 includes Fundraiser Tee Sign
*** \$75 for each additional member of the same company
- E** Educator – No Dues required
- S** Student - \$15 College or University _____
- AS** Associate (Greens Chairmen, Park and Rec Directors, Golf Course staff, etc.) - \$45
- R** Retired – ½ price of classification of retirement-----Classification of retirement _____

DUE BY APRIL 1ST

Make checks payable to: SIGCSA Donation to Research/Scholarship Fund \$ _____

Send To: SIGCSA Chapter Executive Director
 John Kueper
 951 Clinton Road
 Carlyle, IL 62231

Contact Info:
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