



# Florida West Coast Golf Course Superintendents Association



## RENEWAL FORM

CIRCLE CORRECT CLASS    A   SM   C (Assistant)   D (Vendor)   E (Associate)   AA (Lifetime)   H (Honorary)

Name: \_\_\_\_\_ Company/Club: \_\_\_\_\_

Company Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_

Company or Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Preferred Mailing Address:     Home    Business    Birthday: \_\_\_\_\_

Fax: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Mailing Address (if different from business):

Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_

Make checks payable to **FWCGCSA**    GCSAA # \_\_\_\_\_

Mail to:    1936 Bruce B. Downs Blvd. #305    (A/SM/C) Members Expiration Date: \_\_\_\_\_  
              Wesley Chapel, FL 33543

*Please check box if interested in volunteering for Board, Committees, etc.*

Dues for A or SM Members:	\$150.00
Dues for C & E Members:	\$100.00
Dues for AA & H Members:	FREE
Dues for D Members:	\$400.00*

*\* Corporate Dues of \$400.00 (Class D) include one corporate representative. Each additional representative is \$50.00 per person (Limit of Two Additional Representatives).*

### PLEASE INCLUDE NAME AND ADDRESSES FOR ADDITIONAL REPRESENTATIVES:

Name 1: \_\_\_\_\_ Address: \_\_\_\_\_

City/Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_

Name 2: \_\_\_\_\_ Address: \_\_\_\_\_

City/Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_

**ARTICLE 3 SECTION B** – All dues become due on July 1<sup>st</sup> which is the beginning of each fiscal year. All members will be billed at least 30 days prior to this date by the association.

**ARTICLE 3 SECTION D** – Any member paying dues after July 1<sup>st</sup> shall be assessed a \$10 late charge *until July 31<sup>st</sup>*. After which, they will be dropped from the membership rolls and must reapply for membership.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*White and Yellow copy – Send with Payment*