



10685 N. 69<sup>th</sup> Street, Scottsdale, AZ 85254

**2020 Membership Renewal Invoice**  
**Class A, B, Facility, C, GE, Student & AS**  
**Golf Course Personnel**

Thank you for renewing your membership with Cactus & Pine, GCSA. Please contact us with any questions: 480-609-6778, fax 480-348-5976 or [Carmella@cactusandpine.com](mailto:Carmella@cactusandpine.com)  
 Visit our website at [www.cactusandpine.com](http://www.cactusandpine.com)

Credit Cards (Master Card, Visa & AMEX) Accepted for payment. If payment by check, please make payable to Cactus & Pine, GCSA

**Mailing Address:**

**Membership Dues for Year 2020**

- A Superintendent (More Than 3 years) **\$200.00**
  - B Superintendent (Less Than 3 years) **\$200.00**
  - Facility Membership **\$200.00**
  - C Assistant Superintendent **\$130.00**
  - NEW MEMBER** C Assistant Superintendent  
 First Year: **\$65.00**
  - Mechanic, Irrigation, Spray Tech **\$100.00**
  - General or Associate **\$140.00**
  - Student **\$ 25.00**
- OR
- All Inclusive Membership/Seminars **\$540.00**  
 (\*NON TRANSFERABLE) ALL Class C **\$455.00**
  - Honorary, Retired Membership **NO CHARGE**

- I am a Certified GC Superintendent. Yes \_\_\_ No \_\_\_
- GCSAA Number: \_\_\_\_\_
- Office of Pest Management Number: \_\_\_\_\_
- Arizona Department of Agriculture #: \_\_\_\_\_
- Water Source: \_\_\_\_\_
- Type of Club/Course:  Private  Semi  Public
- Type of grass on my course:  
 Greens: \_\_\_\_\_ Fairways: \_\_\_\_\_
- Do you Overseed your Roughs? Yes: \_\_\_ No: \_\_\_
- I am interested in serving on the following Committee(s) (Please Choose)
  - Education  Government Relations
  - Membership  Fundraising
  - Scholarship/Research  Publications/PR
  - Serving on the Board of Directors

Golf Handicap: \_\_\_  
 Birth Date: \_\_\_/\_\_\_/\_\_\_  
 Shirt Size: \_\_\_

Office Use Only

Received: \_\_\_/\_\_\_/\_\_\_ Amt: \_\_\_\_\_  
 Check # \_\_\_\_\_ Cash \_\_\_\_\_ Credit Card \_\_\_\_\_  
 Database: \_\_\_\_\_

Name \_\_\_\_\_

Title \_\_\_\_\_

Street or P.O. Box Number \_\_\_\_\_

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

Home Telephone #: \_\_\_\_\_

Cell #: \_\_\_\_\_

Information Preferred by: **E-MAIL** \_\_\_ **TEXT** \_\_\_

I hereby authorize Cactus & Pine to send me Information by Text and/or email:

Your signature required

**Information to be Listed in Directory**

Name of Golf Course / Company \_\_\_\_\_

Street or P.O. Box Number \_\_\_\_\_

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

Work/Cell Telephone #: \_\_\_\_\_ Work Fax #: \_\_\_\_\_  
 (To Be Listed in Directory)

**E-Mail Address**

Name of Spouse: \_\_\_\_\_ Children: \_\_\_\_\_

Credit Card: MC \_\_\_ VISA \_\_\_ AMEX \_\_\_ A 3% Processing fee will be added when using a Credit Card

Exp Date: \_\_\_/\_\_\_/\_\_\_ 3 or 4 Digit Code: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Credit Card #: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_