

Mohawk Valley Golf Course Superintendents' Association 2016 Dues Payment Form

Date: _____

Please complete the following information:

Name(s): _____

Business/Club Affiliation: _____

Needed for Updating! (If no changes, please write "**NO CHANGES**" on the line below)

Address: _____

Phone Number: _____

Job Title: _____

Email Address: _____

If No Changes, please indicate here: _____

2016 Dues Payment

Membership Classifications (Select Below) \$50 (Honorary Exempt)

Superintendent/Owner (A) _____ Assistant/Mechanic (B) _____

Executive/Sales (S) _____ Honorary/Retired (H) _____

**Please make checks payable to Mohawk Valley Golf Course Superintendents' Association
and mail prior to February 2nd, to:**

Greg Gagen
Secretary/Treasurer, MVGCSA
8121 Maple Flats Road
Cleveland, NY 13042

Or, bring payment with you to the Franklin Hotel meeting on February 2nd.

Thank you!