



CORPORATE MEMBERSHIP RENEWAL APPLICATION

Atlantic Golf Superintendents Association /
Association Atlantique des Surintendants de Golf

COMPANY NAME (Please Print):		
CITY/TOWN:	PROVINCE:	POSTAL CODE:
EMAIL ADDRESS:		
CORPORATE MEMBER NAME:	POSITION:	
TELEPHONE: (H)	(W)	(C)
<p>On behalf of above said company, I hereby make application for renewal of membership in the Atlantic Golf Superintendents Association. My signature on this application indicates permission to publish contact information (including E-mail address) in the AGSA Membership Directory as well as permission to publish such information on the AGSA website. Please include only information you would like made available in the directory and website!</p> <p>SIGNATURE: _____ DATE OF APPLICATION: _____</p> <p style="text-align: center;"><i>Canada's anti-spam legislation (CASL) became effective July 1, 2014. By signing this application you agree to receive electronic messages from the AGSA.</i></p>		
FOR AGSA OFFICE USE ONLY		
APPROVED: _____		
Date	Signature of Secretary/Treasurer	Membership Class
<input type="checkbox"/> CORPORATE MEMBERSHIP - \$210.00 (+ HST) IF PAYING FROM INVOICE, INVOICE #: Recognizes the sales and service companies that deal with the association. If for any reason a stated representative leaves a corporation, membership in the Association shall remain with the company. Corporate Members shall not have the right to vote. Corporations who are not members of the Association shall not be allowed to solicit or display their wares at any event sanctioned by the Association.	<input type="checkbox"/> INDUSTRY AFFILIATE MEMBERS - \$165.00 (+ HST) IF PAYING FROM INVOICE, INVOICE #: To qualify for an industry affiliate membership, an Applicant must be doing business in the turfgrass industry or in the employ of an AGSA member. An Industry Affiliate member shall not be entitled to vote.	