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I would like to receive (continue receiving) LANDSCAPE MANAGEMENT free each month: O Yes O no

Signature: ___________________________ Date: __________

Fill in ovals as shown:

1. My primary business at this location is: (fill in ONE only)
   - [ ] 01 Golf Courses (Also fill in questions #3 & #4)
   - [ ] 02 Golf Course Maintenance
   - [ ] 03 Turf Aeriation
   - [ ] 04 Irrigation Services
   - [ ] 05 K Paving, Deck & Patio Installation
   - [ ] 06 Landscaping, Pest Control
   - [ ] 07 Ornamental Care
   - [ ] 08 Tree Service Companies
   - [ ] 09 Fire Protection
   - [ ] 10 Electrical/Utility Services
   - [ ] 11 Water Works/Septic Installation
   - [ ] 12 HVAC/Duct Work
   - [ ] 13 Plumbing
   - [ ] 14 Boating/Inland Waterway
   - [ ] 15 Hunting/Fishing
   - [ ] 16 Other (please specify)

2. Which of the following best describes your title? (fill in ONE only)
   - [ ] 01 Executive/Administrator
   - [ ] 02 Manager/Superintendent
   - [ ] 03 Government Official
   - [ ] 04 Specialist
   - [ ] 05 Other Titled and Non-Titled Personnel

3. Is your golf course:
   - [ ] 01 Public
   - [ ] 02 Semi Private
   - [ ] 03 Private
   - [ ] 04 Hotel/Resort
   - [ ] 05 Municipal

4. If you work for a golf course, how many holes are on your grounds?
   - [ ] 01 19
   - [ ] 02 27
   - [ ] 03 36

5. How many acres are maintained at your facility?
   - [ ] 01
   - [ ] 02
   - [ ] 03

6. SERVICES PERFORMED (fill in ALL that apply)
   - [ ] 01 Mowing
   - [ ] 02 Turf Fertilization
   - [ ] 03 Turf Disease Control
   - [ ] 04 Irrigation Services
   - [ ] 05 Shady Tree Services
   - [ ] 06 Grass Seed
   - [ ] 07 Landscape/Course Design
   - [ ] 08 Snow Removal
   - [ ] 09 Other (please specify)

7a. Do you specify, purchase or influence the selection of landscape products?
   - [ ] Yes
   - [ ] No

7b. If yes, check which products you buy or specify: (fill in ALL that apply)
   - [ ] 01 Aerators
   - [ ] 02 Herbicides
   - [ ] 03 Insecticides
   - [ ] 04 Line Trimmers
   - [ ] 05 Mowers (reel/rotary)
   - [ ] 06 Sprayers
   - [ ] 07 Tractors
   - [ ] 08 Utility Vehicles

8. Do you have a modem?
   - [ ] Yes
   - [ ] No

9. Do you have access to the Internet?
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Date:

1. My primary business at this location is: (fill in ONE only)

2. Which of the following best describes your title? (fill in ONE only)

3. Is your golf course:

a. Oo you specify, purchase or influence the selection of landscape products?

b. It yes, check which products you buy or specify: (fill in ALL that apply)

4. If you work for a golf course, how many holes are on your grounds?

5. How many acres are maintained at your facility?

6. SERVICES PERFORMED (fill in ALL that apply)

7a. Do you specify, purchase or influence the selection of landscape products?

7b. If yes, which products do you buy or specify; (fill in ALL that apply)

8. Do you have a modem?

9. If yes, which products do you buy or specify; (fill in ALL that apply)

10. By check which products you buy or specify; (fill in ALL that apply)

11. By check which products you buy or specify; (fill in ALL that apply)
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