

**Photo copy only if there are changes and send to:**  
**Midwest Association of Golf Course Superintendents, Inc.**  
**P. O. Box 204 — North Aurora, IL 60542**  
**Fax 708/896-6811**

It will soon be time for printing the next edition of the M.A.G.C.S. membership directory. The accuracy and completeness of the data depends largely on you, the individual member to inform us of any changes or corrections. If your membership data is incorrect or incomplete, PLEASE inform us so we can update the data base.

Name \_\_\_\_\_  
First Name Middle Name Last Name Spouse Name

Home R.F.D. or Street and Number \_\_\_\_\_ Residence Phone # \_\_\_\_\_

City or Post Office \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Name of Club or Employer \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Business Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Mail sent to Home \_\_\_\_\_ Work \_\_\_\_\_

Mobile or Pager # \_\_\_\_\_ Golf Handicap \_\_\_\_\_

Exact title of your present position \_\_\_\_\_

I am a Class \_\_\_\_\_ member of the M.A.G.C.S.  
A.B.C.D.E.H.



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