

NAME _____		TITLE _____	
COURSE/CO. NAME _____			
COURSE ADDRESS _____			
CITY _____		STATE _____	ZIP _____
I WISH TO RECEIVE/CONTINUE RECEIVING GOLF BUSINESS <input type="checkbox"/> YES <input type="checkbox"/> NO			
SIGNATURE _____		DATE _____	

PLEASE ANSWER THE FOLLOWING QUESTIONS

- A. Type of golf facility or business:
(check one only)
1 ☐ Private
2 ☐ Semi-private
3 ☐ Daily fee
4 ☐ Municipal/County/State
5 ☐ Hotel/resort
6 ☐ School/College/University
7 ☐ Military
8 ☐ Manufacturer/rep.
9 ☐ Dealer/distributor
10 ☐ Course builder/architect,
 agronomist, other allied to golf
11 ☐ Other (specify) _____
- B. Job function:
(check only one)
1 ☐ Owner ☐ Partner
 ☐ Golf course corp. president
 (not elected official)
2 ☐ General manager
3 ☐ Director/commissioner of parks & rec.
4 ☐ Superintendent
5 ☐ Assistant superintendent
6 ☐ Greenskeeper
7 ☐ Green committee chairman
8 ☐ Elected club official
 (specify title below) _____
9 ☐ Other (specify) _____
- C. Size of golf facility
1. (Check one only.)
☐ 9 holes ☐ 18 holes
☐ 27 holes ☐ 36 or more holes
2. Does your facility operate a
 practice/driving range?
 ☐ Yes ☐ No
3. Total yardage of facility: _____

CIRCLE THE ITEM NUMBERS FOR MORE INFORMATION ON PRODUCTS

101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120
121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140
141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160
161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180
181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200
201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220
221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240
241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260
261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280
281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

FIRST CLASS

PERMIT NO. 2675

CLEVELAND, OHIO

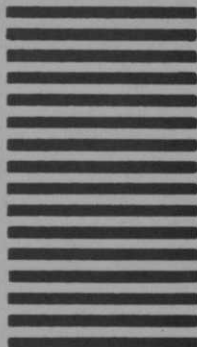
POSTAGE WILL BE PAID BY ADDRESSEE

Attention: Circulation Dept.

Golf Business

9800 Detroit Ave.

Cleveland, Ohio 44102



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

FIRST CLASS

PERMIT NO. 665

DULUTH, MINN

POSTAGE WILL BE PAID BY ADDRESSEE

Golf Business

Box 6136

Duluth, MN 55806

SUBSCRIPTION FORM

Send my personal subscription of Golf Business

NAME

TITLE

COMPANY or COURSE NAME

ADDRESS

CITY

STATE

ZIP

Signature

☐ 1 year (\$18 U.S. & Canada)

☐ Check Enclosed ☐ Bill Me

1 year Foreign (\$24)

☐ Foreign Air Mail per year (\$36 additional)

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agronomist, other allied to golf
- 11 ☐ Other (specify) _____

B. Job function:
(check only one)

- 1 ☐ Pro-shop manager
- 2 ☐ Golf professional
- 3 ☐ Assistant golf professional
- 4 ☐ Clubhouse manager
- 5 ☐ Assistant superintendent
- 6 ☐ Assistant greenskeeper
- 7 ☐ Green committee chairman
- 8 ☐ Elected club official
(specify title below)
- 9 ☐ Other (specify) _____

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A lot of landscaping and construction jobs are too big for a lawn and garden tractor, yet too small for a large industrial tractor.

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We also offer a choice of tire sizes and styles to fit your needs. And your John Deere dealer is a man you can count on for parts, service and good advice.

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