



32nd Annual KGCSA Scholarship & Research Tournament

The Kansas Golf Course Superintendents Association is established to serve members, advance the profession and promote the enjoyment of golf through responsible golf course management practices.



Title Sponsor:



Date: Tuesday, June 14, 2016

Location: Firekeeper GC
(12524 150th Rd., Mayetta)
The 240-acre course is located across the street from the Prairie Band Casino & Resort, just 15 minutes north of Topeka.

Host: Rob Christie

Schedule:

8:30 a.m. Registration
10:00 a.m. Golf (shotgun start)
At the turn Lunch
3:00 p.m. Live Auction and Awards Reception

A block of rooms has been reserved at the Prairie Band Resort & Casino for Monday & Tuesday, June 13 and 14 for a rate of \$89. To make reservations, call (785) 966-7777 and refer to group code G06KGCS to receive the discounted group rate.

Format: 6-person scramble (only one pro per team). Print all names on the entry form.

Cost: \$100.00 per player or \$600.00 per team.

Dress Code: Collared shirts, no jeans or cargo pants; soft spikes.

Live Auction: A *Live Auction* will be held following golf. Your donations will be listed to the membership prior to the event. If you would like to donate an item, please list below.

There will be other cash games/contests (Skins, Hole-in-one and 50/50 Pot) to participate in if you are interested.

Reservation Deadline: May 26, 2016

☐ Yes! We plan to attend the 2016 KGCSA Scholarship & Research Tournament on June 14.

Entry Fee: \$100.00/player \$600.00/Team (6-man scramble)

TEAM representing (Golf Course/Company): _____

Player 1. _____

Player 4. _____

Player 2. _____

Player 5. _____

Player 3. _____

Player 6. _____

Address: _____

City _____ State _____ Zip _____ Phone # _____

E-mail _____

Note: In the event of rain and the Golf Course Supt. closes the course, a random drawing will determine the winners and the auction will commence. No refunds.

Item to donate to Live Auction: _____ Estimated Value: \$ _____

Payment:

☐ Check payable to KGCSA enclosed

☐ Invoice (payable upon receipt)

☐ Credit Card _____ Number: _____ Exp. Date _____ Sec. Code _____

Name on card (printed) _____

Send by May 26 to: KGCSA, 2021 Throckmorton Plant Sci. Cntr., Manhattan, KS 66506 Fax: (785) 532-5780 cdipman@ksu.edu