



# PGA

## Rocky Mountain Section

It is the Section’s responsibility to ensure that each Member and Associate is properly classified; therefore we are conducting an annual review of all classifications.

The Employment Information form must be completed with all appropriate signatures and returned to the Section no later than February 15, 2024. Members and Associates are cautioned to be factual as falsification of information could result in disciplinary action. **The completion and return of the Employment Information form is mandatory prior to obtaining a 2024 RMSPGA Player Permit.**

### EMPLOYMENT INFORMATION

- Are you currently eligibly employed in the Rocky Mountain Section? \_\_\_\_\_
- Golf Course/Facility Name \_\_\_\_\_
- What is your current Member or Associate classification? \_\_\_\_\_
- What are your basic duties and responsibilities in your current position? \_\_\_\_\_  
\_\_\_\_\_
- How many **hours do you spend during a normal work week** in the following areas:  
 Golf Instruction \_\_\_\_\_ Golf Operations \_\_\_\_\_ Playing \_\_\_\_\_  
 Merchandising \_\_\_\_\_ Other (Specify) \_\_\_\_\_
- Are you currently employed more than 36 hours a week **outside of the golf industry?** \_\_\_\_\_

\_\_\_\_\_  
Name of PGA Member/Associate

\_\_\_\_\_  
Signature of PGA Member/Associate

\_\_\_\_\_  
Name of Highest Ranking PGA Professional  
or Owner/Manager of Facility

\_\_\_\_\_  
Signature of Highest Ranking PGA Professional  
or Owner/Manager of Facility

**Note: Signature is required for the following classifications (A-6, A-7, A-8, A-14, A-15 and all Associates)**

This completed form must be returned to the Section prior to February 15, 2024.

Mail: Rocky Mountain Section PGA  
P.O. Box 340  
Star, ID 83669

Fax: (208) 939-6058