

NORTHERN MICHIGAN TURF MANAGERS ASSOCIATION

MAY 28 1985

DAVID E. LONGFIELD, PRESIDENT
JON SCOTT, VICE-PRESIDENT

THOS. J. REED, SECRETARY-TREAS.

3733 APOLLO DRIVE

TRAVERSE CITY, MI 49684

PHONE: 616/943-8343

TUESDAY, JUNE 11th, 1985
CRYSTAL DOWNS COUNTRY CLUB
FRANKFORT, MICHIGAN



The above date and location are very special in that it is the ninth annual benefit day for THE MICHIGAN TURFGRASS FOUNDATION. M.T.F. finances almost 100% of all turfgrass research being done in Michigan therefore we in the industry, as well as we the golfers that benefit by this research with better grasses, should contribute something back into what we are enjoying. This is an opportunity to do so.

Crystal Downs Country Club was built about 1927 with Alister Mackenzie as the architect and was built just after Mackenzie built Cypress Point on the Monterey Peninsula. Last year, the American Society of Golf Course Architects listed the 130 best designed golf courses in the United States, by states. In Michigan they listed Country Club of Detroit as number 1, Crystal Downs as number 2, Oakland Hills as number 3 and Point of Woods as number 4 in the state. Augusta National is an Alister Mackenzie course so you have an opportunity to play an outstanding links course and for the benefit of M.T.F.

Golf will be limited to the first 100 persons that will apply for this tournament. Starting times will be between 11:00 A.M. and 2:00 P.M. You can make starting times by phoning 616/352-9117. The cost for this package will be fifty dollars per person. This breaks down to \$15.00 for dinner, \$2.00 for golf, $\frac{1}{2}$ golf cart and your donation to Michigan Turfgrass Foundation. If you are involved in turfgrass or a friend, since M.T.F. is a 501 (C)(3) Foundation, this total donation should be fully tax deductible.

An application is attached for you to fill out listing your foursome and your check to cover all players must accompany your application made payable to this N.M.T.M. Ass'n and must be sent to our Sec.-Treas. Tom Reed by June 5th. In the event that you have not made up a foursome, we want you to come anyway and we will try to make you up with another group. If alone or a twosome, we suggest that you get there at Crystal Downs early and every effort will be made to pair you up.

We would also like our commercial people to remember that this is a benefit day and we would welcome them to contribute gifts which can be used as prizes or anything which might be appropriate for the players. These items can be brought to the course or given to any of the Board members. Credit will be given in our next newsletter and the gifts should be tax deductible for the benefit. In advance, we would like to thank you for your kindness in helping.

Dinner will be served at 7:00 P.M. in the club house of Crystal Downs. Speakers for the evening will be Mr. Bruce Wolfrom, President of M.T.F. and Mr. John Read, Vice-President of M.T.F. and membership chairman. There will be no business meeting because many will be out on the golf course late and only golf prizes will be given out prior to the introduction of the speaker.

Let us all get behind this BENEFIT and get our checks and applications in to Tom Reed immediately.

APPLICATION
CRYSTAL DOWNS COUNTRY CLUB
JUNE 11, 1985

9TH ANNUAL BENEFIT DAY FOR MICHIGAN TURFGRASS FOUNDATION RESEARCH

NAME _____ Starting Time _____

NAME _____

NAME _____

NAME _____

Please send check to Mr. Tom J. Reed, 3733 Apollo Drive, Traverse City, Michigan 49684 Phone: 616/943-8343

For starting times, phone 616/352-9117

Lunch will be available in the Pro Shop of Crystal Downs

Happy Hour and Dinner will be served in the Club House.

Check for \$50.00 per person should accompany this application. Only the first 100 applicants will be accepted. There will be no exceptions.

A cash bar will be available for drinks.

Michigan Turfgrass Foundation

Make Checks Payable to:
Michigan Turfgrass Foundation
% Dept. Crop & Soil Sciences
P. O. Box 275
Okemos, Michigan 48864

MTF MEMBERSHIP APPLICATION

(please type or print)

Name (organization) _____

Name of Voting Delegate _____

Street _____

State _____

Membership Category

- Organization \$40
 Individual \$25
 Student

- Payment enclosed
 Bill my organization
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