

INTEREST LETTER
TO STMA MEMBERS

Date

Name
Company
Address

Dear:

A number of sports turf professionals have expressed an interest in meeting locally on a regular basis.

According to the STMA Bylaws, a local chapter may be organized if a petition, signed by a minimum of twenty-five persons in the area, is submitted to the STMA Board stating intent and desire to hold chapter meetings under the auspices of the STMA.

Perhaps we could meet once a month or bi-monthly either for lunch and an afternoon of discussion about subjects of mutual interest or an evening dinner meeting?

There are, according to STMA Headquarters, _____ (#) _____ STMA members in the surrounding _____ (Location) _____ area. Are you as interested as I am in starting up a local chapter? If so, please contact me via mail, phone or email by _____ (Date) _____.

At our first get together, we will look for volunteers to fill positions necessary to direct chapter affairs. If you would like to volunteer, please let me know.

The combined interest of each of us is reflected in the successful development of STMA. Let's keep the momentum going!

Very truly yours,

Name

CONTACT: (CHAPTER PRESIDENT)
(PHONE NUMBER)

FOR IMMEDIATE RELEASE:

(Location) Forms (is forming) Local Chapter for Sports Turf Management Professionals

(Location) has formed (is forming) a local chapter of the Sports Turf Managers Association (STMA) to provide a forum for information exchange and networking for local sports turf management professionals.

On an international level, STMA is dedicated to developing the theory and understanding of sports turf management and promoting the best sports surfaces for all levels of play. STMA Headquarters is located in Council Bluffs, Iowa.

The new chapter allows (will allow) professionals in sports turf management to discuss concerns, exchange ideas and explore to new technologies on a more frequent basis.

Topics the local chapter will address at its meetings include: field marking, personnel, career pathing, infield grooming, weed ID and control, reconstruction, (ADD ANY OTHERS).

Officers of the chapter are: (LIST) Goals of the chapter are: (LIST) The next meeting is: (DATE, TIME, LOCATION).

For more information contact: (CHAPTER PRESIDENT, MAILING ADDRESS, PHONE NUMBER, EMAIL ADDRESS).

- end -

INITIAL MEETING ANNOUNCEMENT

Date

Name

Company

Address

Dear (Name):

The initial meeting to discuss the formation of a (Location) STMA Chapter will be held on (Day, Date) at (Time) at (Place). Please plan to attend this important event.

PURPOSE OF STMA AND THE (Location) CHAPTER

The purpose of the Sports Turf Managers Association (STMA) is to develop the theory and understanding of sports turf management and to promote better and safer sports turf areas.

The (Location) Chapter of STMA will provide STMA members a local forum for the exchange of sports turf management ideas, techniques, practices and new developments. The local chapter will, by its very existence, advance the aims and goals of the STMA.

The chapter will also provide the opportunity for sports turf people to "get to know their neighbors" and to expand their personal and professional networks. The programs presented at the local chapter can address issues in greater detail as well as reflect our regional differences in field management methods.

INITIAL MEETING OBJECTIVES

- Validate our assumption that there is interest in forming a local chapter
- Solicit input on desired meeting format, program topics, ideas on membership drives, etc.
- Assign specific committee responsibilities
- Get more people involved

Please let me know by (Date) if you plan to attend this initial meeting.

Very truly yours,
(Name)

MEETING STRUCTURE SURVEY

The (Location) Chapter of STMA has been formed to provide STMA members a local forum for the exchange of sports turf management expertise and experience. In order to provide programs in a manner most responsive to your needs and desires, you must "speak up."

Please indicate your preferences

PROGRAM TOPICS OF INTEREST TO ME

- | | |
|--|--|
| <input type="checkbox"/> How to manage sports turf | <input type="checkbox"/> Field marking |
| <input type="checkbox"/> Field grooming | <input type="checkbox"/> Reconstruction |
| <input type="checkbox"/> Motivating employees | <input type="checkbox"/> Handling multipurpose fields |
| <input type="checkbox"/> New Technology | <input type="checkbox"/> Career pathing in sports turf |
| <input type="checkbox"/> How to train employees | <input type="checkbox"/> Personnel selection |
| <input type="checkbox"/> Systems, procedures & practices | <input type="checkbox"/> Measuring performance |

Other suggested topics and/or speakers _____

MEETING FORMAT PREFERENCES

- | | |
|--|--|
| <input type="checkbox"/> Speaker | <input type="checkbox"/> Roundtable topics & group summary |
| <input type="checkbox"/> Panel discussion | <input type="checkbox"/> Combination(s) of the above |
| <input type="checkbox"/> Company/Facility Tour | |

MEETING DATE PREFERENCE

- | | | |
|-----------------------------------|-------------------------------------|---|
| <input type="checkbox"/> Monthly | <input type="checkbox"/> Bi-Monthly | <input type="checkbox"/> No Summer Meetings |
| <input type="checkbox"/> Monday | <input type="checkbox"/> Tuesday | <input type="checkbox"/> Wednesday |
| <input type="checkbox"/> Thursday | <input type="checkbox"/> Friday | |

What did you like about tonight's meetings? _____

How would you improve tonight's meeting? _____

NAME _____ **COMPANY** _____ **PHONE** _____

(optional)

SUMMARY OF INITIAL MEETING

It will help if you write a short summary of the meeting in MEMORANDUM format and send the next day to all attendees. A suggested format follows:

DATE:

MEMO TO: (list attendees)

FROM: (your name)

SUBJECT: INITIAL MEETING TO FORM THE (Location) CHAPTER
OF THE SPORTS TURF MANAGERS ASSOCIATION

(Summary)

In addition to summarizing the meeting, you will want to remind all who receive the memo of the next scheduled meeting, and that to succeed "we all need to work together to have as many of our industry friends attend as possible."

PARTICIPATION SURVEY

What do you expect to get out of participation in STMA? _____

In what areas would you like to be actively involved at the local chapter level?

LOCAL CHAPTER COMMITTEES

- | | |
|----------------------------|-------------------------------------|
| _____ Program | _____ Finance |
| _____ Membership | _____ Communication/Publicity |
| _____ Meeting Arrangements | _____ Commercial Appreciation Night |
| _____ Chapter Officer | _____ Committee Chair |

NAME _____

COMPANY _____

ADDRESS _____

PHONE () _____

PETITION FOR STMA CHAPTER CHARTER

DATE _____

We, the undersigned do hereby submit this petition for Charter as a chapter of the Sports Turf Managers Association. We have reviewed and amended, as appropriate, and hereby agree to abide by the Chapter Bylaws of the Sports Turf Managers Association.

_____ CHAPTER _____
(Fill in official name of chapter)

We recommend that, if such charter be granted, the Board establish the geographical area for this chapter to be in the state(s)/Province of _____.

This form must signed by at least twenty-five active members and submitted to STMA Headquarters:

- 1. _____
(Signature) (Print Name) (Phone)

(Company) (Address) (City/State/Zip)
- 2. _____
(Signature) (Print Name) (Phone)

(Company) (Address) (City/State/Zip)
- 3. _____
(Signature) (Print Name) (Phone)

(Company) (Address) (City/State/Zip)
- 4. _____
(Signature) (Print Name) (Phone)

(Company) (Address) (City/State/Zip)
- 5. _____
(Signature) (Print Name) (Phone)

(Company) (Address) (City/State/Zip)
- 6. _____
(Signature) (Print Name) (Phone)

(Company) (Address) (City/State/Zip)

7. _____
(Signature) (Print Name) (Phone)

(Company) (Address) (City/State/Zip)

8. _____
(Signature) (Print Name) (Phone)

(Company) (Address) (City/State/Zip)

9. _____
(Signature) (Print Name) (Phone)

(Company) (Address) (City/State/Zip)

10. _____
(Signature) (Print Name) (Phone)

(Company) (Address) (City/State/Zip)

11. _____
(Signature) (Print Name) (Phone)

(Company) (Address) (City/State/Zip)

12. _____
(Signature) (Print Name) (Phone)

(Company) (Address) (City/State/Zip)

13. _____
(Signature) (Print Name) (Phone)

(Company) (Address) (City/State/Zip)

14. _____
(Signature) (Print Name) (Phone)

(Company) (Address) (City/State/Zip)

15. _____
(Signature) (Print Name) (Phone)

(Company) (Address) (City/State/Zip)

16. _____
(Signature) (Print Name) (Phone)

(Company) (Address) (City/State/Zip)

17.	(Signature)	(Print Name)	(Phone)
	(Company)	(Address)	(City/State/Zip)
18.	(Signature)	(Print Name)	(Phone)
	(Company)	(Address)	(City/State/Zip)
19.	(Signature)	(Print Name)	(Phone)
	(Company)	(Address)	(City/State/Zip)
20.	(Signature)	(Print Name)	(Phone)
	(Company)	(Address)	(City/State/Zip)
21.	(Signature)	(Print Name)	(Phone)
	(Company)	(Address)	(City/State/Zip)
22.	(Signature)	(Print Name)	(Phone)
	(Company)	(Address)	(City/State/Zip)
23.	(Signature)	(Print Name)	(Phone)
	(Company)	(Address)	(City/State/Zip)
24.	(Signature)	(Print Name)	(Phone)
	(Company)	(Address)	(City/State/Zip)
25.	(Signature)	(Print Name)	(Phone)
	(Company)	(Address)	(City/State/Zip)

NOTE: You may use as many additional sheets as necessary to accommodate all charter members.

STMA CHAPTER CHARTER AGREEMENT

We, the undersigned officers of the newly formed STMA Chapter known as

and located in the state(s)/Province of _____,
do hereby declare that we are in compliance with the constitutional requirements of the STMA and do solemnly
promise that we have read, understand, shall faithfully abide by, and enforce, the Chapter Bylaws dated

_____.

We understand that this chapter is covered under the STMA insurance umbrella and the 501(c)(6) status for non-profit organizations and must therefore remain in complete compliance with the STMA Bylaws and procedures so as not to jeopardize said coverage and status.

With this agreement, we submit: 1) a copy of signed Bylaws (Form I), 2) a list of names and addresses of all Charter Members, 3) a list of Chapter Officers including company, address and phone, 4) application for Employer I.D. Number (Form J), 5) Chapter Petition (Form G), 6) Chapter Incorporation papers or proof of application for Chapter Incorporation, and 7) payment for Chapter affiliation fee and payment for non-national members.

It shall be the purpose of this chapter to provide sports turf professionals in the surrounding area an opportunity to meet on a frequent basis to encourage the healthy exchange of management ideas, experiences and expertise. Chapter programs and activities will be directed toward these members. Further, this chapter will encourage non-member management participation at the chapter level and promote their membership in the STMA.

As an STMA chapter, we agree to hold a minimum of four meetings annually, maintain a minimum of twenty-five active members, and continue to comply with the procedures and Bylaws established by the STMA.

We understand that failure to abide by these procedures and Bylaws will require a review by the STMA Executive Board and may result in termination of this agreement.

Signed this _____ day of _____ 20_____

_____ President

_____ President-Elect

_____ Comm. VP

_____ Secretary

_____ Treasurer

IRS Form SS-4

Application for Employer Identification Number

This is updated frequently and should be downloaded from the IRS web site.

(4 pages w/ instructions)

FILING FOR YOUR CHAPTER'S ARTICLES OF INCORPORATION

Please contact your Secretary of State for your official forms needed to incorporate your chapter. After receiving the forms, use the wording below in filling out your specific state forms:

The name of the corporation should read as follows:

_____ Chapter
Sports Turf Managers Association

The name and address of the registered agent and/or office should be someone from your chapter that you feel is stable and responsible and will be around for a while. (So that you don't have to file changes every year)

The duration of the corporation is "perpetual".

The purpose for which the corporation is organized should read as follows:

The purpose of the chapter is to give Sports Turf Managers Association members the opportunity to meet on a regular basis at the local level to exchange sports turf management ideas, techniques, practices and new developments. The local chapter will, by its very existence, advance the art and science of sports turf, which is the goal of STMA.

If your specific state forms have other questions that you are not sure how to answer, please do not hesitate to contact STMA Headquarters for assistance.

**Chapter incorporation is very important. It protects your officers, committees and other individuals working on behalf of a chapter from being held personally liable and/or sued in the event of a chapter-related incident.

**NOTE: Many states require an Annual Report be filed (available from your Secretary of State) each year to maintain incorporation status. Please check with your state for its requirements.

FEDERAL TAX REPORTING

It is necessary for your chapter to file Federal Tax Form #990 **ONLY** if your gross income is more than \$25,000 during a fiscal year. This form can be obtained from your local IRS Department.

Unless your Chapter has earned more than \$25,000 during a fiscal year, **DO NOT** send any Federal tax forms to the IRS. Your Chapter is automatically covered under the STMA tax umbrella.

STATE TAX REPORTING

Most state requirements are the same as federal -- you are not required to file a tax form unless your gross income exceeds \$25,000.

However, some states have separate requirements.

Therefore, it is up to you to check with the Secretary of State's office in the state your chapter is incorporated to determine if there are any state tax or financial reports the chapter must file.

TAX EXEMPT STATUS

If you are ever asked to show proof that your Chapter is a tax-exempt organization, please use the two sheets found following this page.

(stma logo)

This letter is to confirm that all STMA chapters, and in particular the

_____ Chapter, are recognized by the Association as subordinate and are exempt from Federal Income Tax as a Section 501(c)(6) organization of the Internal Revenue Code, GEN 9414.

The attached letter also shows that the IRS recognized the STMA and its subordinates as exempt from Federal Income Tax as organizations of the type described in Section 501(c)(6) of the Internal Revenue Code.

Kim Heck
Executive Director

Internal Revenue Service

Department of the Treasury

District
Director

230 S. Dearborn St., Chicago, Illinois 60604

Sports Turf Managers Association
805 New Hampshire, Ste. E
Lawrence, KS 66044

Person to Contact: L. White
Telephone Number: 312 886-1278
Refer Reply to: EO: 7201: LW

Date:

Dear Applicant:

We have considered your application for a group exemption letter recognizing your subordinates as exempt from Federal Income Tax as organizations of the type described in Section 501(c)(6) of the Internal Revenue Code.

Our records show that you were recognized as exempt from Federal Income Tax under Section 501(c)(6) of the Code. The exemption letter remains in effect.

Based on the information supplied, we recognize your named subordinates on the list you submitted as exempt from Federal Income Tax under Section 501(c)(6) of the Internal Revenue Code.

You and your exempt subordinates whose gross receipts each year are normally more than \$25,000 are each required to file Form 990, Return of Organization Exempt from Income Tax, by the 15th day of the fifth month after the end of the annual accounting period. If you prefer, you may file a group return for those subordinates that authorize you in writing to include them in that return. This would be in addition to your separate return. The law imposes a penalty of \$10 a day, up to a maximum of \$5,000, when a return is filed late, unless there is a reasonable cause for the delay.

You and your exempt subordinates are not required to file Federal Income Tax returns unless subject to the tax on unrelated business income under Section 511 of the Code. Each organization subject to this tax must file Form 990-T, Exempt Organization Business Income Tax Return. In this letter we are not determining whether any of your or your subordinates present or proposed activities are unrelated trade or business as defined in Section 513 of the Code.

Unless specifically excepted, you and your subordinates are liable for social security (FICA) taxes for each employee to whom you or a subordinate paid \$ 100 or more during a calendar year and unemployment (FUTA) taxes for each employee to whom you or a subordinate paid

SAMPLE COPY ONLY

PLEASE RETURN TO HEADQUARTERS

COMPLIMENTARY MEMBERSHIP APPLICATION

CHAPTER NAME: _____

NAME OF REQUESTOR: _____

COMPANY: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

Our chapter would like our __ (year) _____ Complimentary Membership to go to:

NAME: _____

COMPANY: _____

REASON THE ABOVE NAMED PERSON HAS BEEN GIVEN THIS COMPLIMENTARY MEMBERSHIP:

_____ An STMA membership application has been filled out by the above recipient and is enclosed with this application.

_____ The above recipient is already an STMA member and the credit should be applied to his/her renewal.

_____ The above recipient has just recently paid _____ renewal dues _____ new membership fee. A refund should be sent for this year's dues.

Date

Name or Title

Company

Address

Dear (Name or Title):

Are you interested in maintaining better and safer sports turf areas? Of course you are! In today's economic environment, your customer's value becomes even greater, and the sports turf function becomes the focal point of any business.

Recognizing this, a nucleus of sports turf management professionals has formed the (Location) Chapter of the Sports Turf Managers Association (STMA).

The Association provides a local forum for STMA members to exchange sports turf management ideas, techniques and new developments. Although still in its infancy, the Chapter has grown quickly through the support and enthusiasm of local sports turf management professionals.

Meetings are held the (first/second/third/fourth - Day) of (each month or bi-monthly) at a local area (hotel/restaurant). Roundtable/panel discussions and guest speakers provide thought-provoking, usable information, which can be taken back to the work environment. Topics include "Sports Turf Practices and Procedures", "Managing Multipurpose Facilities", etc. Individual meeting costs average (Dollars).

The local chapter is part of the Sports Turf Managers Association (STMA), which was founded in 1981, and is headquartered in Lawrence, Kan. Since that time the Association has grown to more than 2500 sports turf management professionals and over 300 suppliers worldwide. Annual conferences, bi-monthly newsletters and member surveys focus on advancing the management and development of the sports turf profession.

We seek your support and ask you to encourage your sports turf management's active participation in STMA's activities. We will update you periodically on our progress, and invite your questions, comments and attendance at our meetings.

For further information, please contact (Name) at (Phone Number).

Sincerely,

(Name)

STMA CHAPTER REGISTRATION FORM

We, the undersigned officers of the _____ Chapter located in the state(s)/Province of _____, do hereby declare that we are in compliance with the constitutional requirements of the STMA; have reviewed completely the current chapter procedures/Bylaws dated _____, and do solemnly promise that we shall faithfully abide by, and enforce, said Bylaws/procedures of the STMA.

We understand that this chapter is covered under the STMA insurance umbrella and the 501(c)(6) status for non-profit organizations and must therefore remain in complete compliance with the STMA Bylaws and procedures so as not to jeopardize said coverage and status.

It shall be the purpose of this chapter to provide sports turf professionals in the surrounding area an opportunity to meet on a frequent basis to encourage the healthy exchange of management ideas, experiences and expertise. Chapter programs and activities will be directed toward these members. Further, this chapter will encourage non-member management participation at the chapter level and promote their membership in the STMA.

As an STMA chapter, we agree to hold at least four meetings annually, maintain a minimum of twenty-five active members, and continue to comply with the procedures and Bylaws established by the STMA.

We understand that failure to abide by these procedures and Bylaws will require a review by the STMA Executive Board and may result in termination of this agreement and the surrender of all chapter funds to STMA.

Signed this _____ day of _____ 20____ by the following incoming officers:

_____ President

_____ President-Elect

_____ Commercial Vice President

_____ Secretary

_____ Treasurer