Turf Producers Association Membership Application

Return completed HGT Sod application to:

Turf Producers Association • PO Box 217 • Mead NE 68041

Email: jenny@turfproducers.com Call or text Jenny with questions: 402-480-4936

Date of Application to become a licensed HGT Sod Grower_____

Business/Farm Name _____

Mailing Address_____

City_____

State _____ Zip Code _____

Shipping Address _____

City _____

State _____ Zip Code _____

Phone: _____

Company Website: _____

Company Email: _____

Farm Owner: _____

Email: _____

Farm Manager: _____

Email: _____

Office Manager: _____

Email: _____

Are you a member of TPI? Yes ____ No ____

Farm size _____ (turfgrass acres)

What types of turfgrass do you currently grow? _____

_____

How many acres of bluegrass do you currently have in production? _____

How many years have you grown bluegrass? _____

Current bluegrass sales $ _____

How do you rate your sod pricing compared to your competitor? High _____ Middle_____ Low _____

Describe the growth of your company in the last three years:

_____

_____

How will you integrate HGT sod into your current production plan?

_____

_____

_____

Approximately how many acres of HGT sod will you put into production the first 5 years of membership?

1st Year _____ 2nd Year _____ 3rd Year _____ 4th Year _____ 5th Year _____

Who are your current seed distributors?

_____

_____

Describe your primary sales territory. (cities, counties or geographic areas)

_____

_____

Distance from your farm (miles): _____ % of sales: _____

Population (estimate) _____ Geographical size (estimate) _____

What is your share of this market? _____

Is bluegrass already present in this market? Yes ____ No ____

If Yes, what share of the market is it? _____

What other types of turfgrass will HGT compete with?_____

_____

Describe your secondary sales territory. (area where occasional sod sales are made):

_____

_____

Distance from your farm (miles): _____ % of sales: _____

Population (estimate) _____ Geographical size (estimate) _____

What is your share of this market? _____

Is bluegrass already present in this market? Yes ____ No ____

If Yes, what share of the market is it? _____

What other types of turfgrass will HGT compete with? _____

_____

How are you currently marketing your bluegrass?

(For instance: Radio, Trade Shows, Direct Mail, Salesman, Social Media, etc.)

_____

Describe the marketing strategy that produced the results that you wanted:

_____

_____

_____

How will you integrate HGT into your current marketing plan?

_____

_____

_____

Applicant's Signature _____ Date _____

Approved by the Turf Producers Association Board of Directors – Date _____