



# Turf Producers Association Membership Application

Return completed HGT Sod application to:

Turf Producers Association • PO Box 217 • Mead NE 68041

Email: [jenny@turfproducers.com](mailto: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: \_\_\_\_\_

Fax: \_\_\_\_\_

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?

1<sup>st</sup> Year \_\_\_\_\_ 2<sup>nd</sup> Year \_\_\_\_\_ 3<sup>rd</sup> Year \_\_\_\_\_ 4<sup>th</sup> Year \_\_\_\_\_ 5<sup>th</sup> 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 \_\_\_\_\_