



2019 Turf Field Trip: Lawn Care Showcase

June 25, 2019 | 12:30 PM—4:15 PM

Field trip will begin and end at the MNLA Office | 1813 Lexington Avenue N | Roseville, MN 55113



TIME

12:00 PM—12:30 PM: Check In
12:30 PM: Board Bus
4:15 PM: Return to MNLA Office

TRANSPORTATION

An air-conditioned coach bus will take the group to all tour stops.

DETAILS

- Are you looking for creative ideas to help diversify your lawn care portfolio?
- Interested in seeing some of the top showcase lawns in the Twin Cities maintained by MNLA and MTGF members?
- Looking for unique turfgrass species options or guidance in overcoming specific lawn care challenges?

Join us for an afternoon of practical lawn care education during the first ever Lawn Care Showcase!

Sam Bauer, Bauer Turf, will serve as our bus captain and tour guide.

Soda and water will be provided. Feel free to bring a bag lunch to eat on the bus.

Please park in the MNLA parking lot and along the northside of Garden Street.

2019 MNLA SEMINARS
GENEROUSLY SUPPORTED BY:



Refund Policy. For all MNLA/MTGF education events, we will gladly make a full refund of your registration fee if cancellation notice is received more than two business days in advance of the event. In the two business days prior to the event, a 50 percent refund will be given. No refunds will be given for no-shows or cancellations made the day of the event.

MNLA CP: 2 pts | Level: Beginning

ADVANCED REGISTRATION

Please note that payment **MUST** accompany this form or it will not be processed. MNLA does not invoice for registration.

Make checks payable and mail registration to:

**MNLA, 1813 Lexington Ave N,
Roseville, MN 55113**

Online registration available at:
www.mnla.biz.

Fax registration to MNLA at: 651-633-4986.

Firm Name: _____

Primary Contact: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

On or before June 11

MNLA/MTGF Member: Number _____ @ \$59.00 = _____

Non-Member: Number _____ @ \$89.00 = _____

After June 11

MNLA/MTGF Member: Number _____ @ \$89.00 = _____

Non-Member: Number _____ @ \$119.00 = _____

Total Amount: \$ _____

Names of People Attending

_____ Visa _____ MasterCard _____ Discover

Card Number:

_____ - _____ - _____ - _____

Exp. Date: _____ / _____

Name on Card (please print)

- Check here if the address listed above the same as the billing address for this credit card. If not, you will need to provide the billing address for the credit card below.

Address: _____

City: _____ State: _____ Zip: _____