



Williams Leadership Endowment In Honor of Bob Williams and Bruce R. Williams, CGCS

The Williams Leadership Endowment recognizes Bob and Bruce R. Williams, CGCS, for their contributions and ongoing commitment to mentoring golf course superintendents to become leaders in the golf course management profession. Bob and Bruce have dedicated their careers to strengthening the profession and instilling leadership qualities in superintendents.

Once the Williams Leadership Endowment is fully funded, it will help support the annual **GCSAA Chapter Leadership Workshop**, which focuses on interpersonal and organizational leadership. The workshop is designed for individuals who are aspiring to become the president of their local chapter. Attendees learn about tools and practices to help them be more effective leaders at their golf facility and at their chapter. Specifically, attendees will:

- Better understand their leadership and communication styles, and how it impacts their interaction with others
- Understand how to provide a more meaningful chapter experience, through the engagement of members and volunteer involvement
- Learn about problem solving and decision making methods
- Develop an action plan that addresses one or more challenges impacting their chapter

If you would like to support the development of future leaders for the golf course management profession and industry, please make a gift to The Williams Leadership Endowment. Please consult your tax advisor with regard to deducting charitable gifts.

On behalf of The Williams Family and The Environmental Institute for Golf, thank you for your support.

GCSAA Member # (if applicable) _____

Name: _____

Golf Course/Business: _____

Address: _____

City/State/Zip: _____

Total Donation \$ _____

Please make check payable to:
The Environmental Institute for Golf

Mail to:
PO Box 219004
Kansas City, MO 64121-9004

Please check one:

- One Time Gift Pledge

If you wish to make a pledge, please indicate payment method and frequency:

- Annually Semi-Annually Quarterly Monthly

- Invoice Charge Credit Card

- VISA MasterCard AmEx

_____ - _____ - _____ - _____ Exp. Date ____ / ____

Signature: _____

