



Iowa Sports Turf Managers Association

Cownie Baseball & Soccer Workshop

April 21st 2010

Cownie Baseball Park, 2050 SE 22nd Street – Des Moines, Iowa

Host Manager: Chris Schlosser

Sponsored by MTI Distributing

- 8:00- 8:30 Registrations with Coffee/Rolls - **Sponsored by MTI Distributing**
- 8:30-8:35 Welcome - Chris Schlosser, Iowa Cubs Sports Turf Management
- 8:35-8:45 Quick Overview of Cownie Baseball - Casey Scheidel, Iowa Cubs Sports Turf Management
- 8:45-8:55 Quick Overview of Cownie Soccer - Joe Grandstaff, Iowa Cubs Sports Turf Management
- 9:00-9:45 Aerification Management Practices - Dale Getz, CSFM - The Toro Company
- 9:45-10:00 Break - **Sponsored by MTI Distributing**
- 10:00-10:20 Mound Maintenance on Clay Surface - T J Brewer, Community Field Burlington
- 10:20-10:45 Mound Maintenance on a Flex Clay Cap - Casey Scheidel, Iowa Cubs Sports Turf Management
- 10:45-11:30 Sand Pads& Slit Drainage, Lower Cost Great Performance - Dave Minner, PhD, ISU
- 11:30-12:30 Lunch Break & Vendor time - **Sponsored by MTI Distributing**
- 12:30-2:00 Laser Grading Skin areas - Casey Scheidel, Iowa Cubs Sports Turf Management
- 2:00-2:30 Break - **Sponsored by MTI Distributing**
- 2:30-3:10 Skin Maintenance on Ag Lime Profiles - Casey Scheidel, Iowa Cubs Sports Turf Management
- 3:10-3:45 Skin Maintenance on Clay Profiles - Chris Schlosser, Iowa Cubs Sports Turf Management

All Topics/Times are subject to change

All Sessions are hands on and on the field

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Registration Form – ISTMA Workshop – April 21, 2010, Des Moines, IA

Name: _____

Company: _____

Address: _____

City _____ State _____ Zip _____

Phone: _____

E-mail: _____

Pre-registration by April 16th

- Members (\$35)
- Non-Member (\$50)
- Student (\$15)

STUDENTS MUST PRE-REGISTER

On-site Registration

- Member (\$40)
- Non-Member (\$50)

PAYMENT METHODS:

BY MAIL: Please make checks payable to: **Iowa Sports Turf Managers Association**
 Mail registration & payment to: Iowa Turf Office, 17017 US Hwy 69, Ames, IA 50010-9294

BY FAX: Credit card payment OR Purchase Order **ONLY**— Fax 515-232-8228

Type of card: MasterCard VISA Purchase Order # _____

Credit Card # _____ Exp. Date _____

Card Holder's Name (please print) _____

Signature _____

Contact information:
 515-232-8222
 jeff@iowaturfgrass.org
 patti@iowaturfgrass.org