

Tri-County BeeKeepers Association Membership Form

Tri-County BeeKeepers Association
PO Box 325
St. Cloud, MN 56302
www.tricountybeekeepers.com

BeeKeepers from:
Benton, Stearns, and Sherburne
counties of Central MN & surrounding area

Date: _____

First and Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Primary Email: _____

- I do NOT wish to have my contact information printed in the membership directory

We do not sell, share, or rent your email address or any other personal information collected

The membership fee for the current calendar year (January-December, or the remaining portion of it) is \$15 for both individuals and families. New members will be added to the club's email list to receive notifications about meetings and other events. Annual renewal dues are also \$15 and will be collected at the first meeting of each year, typically held in January or February, depending on whether the club chooses to meet in January.

New/Annual Dues \$15.00

You may also wish to make a donation to:

Donation to the U of M basil Furgala Scholarship: \$ _____

Donation to the TCBA Scholarship fund: \$ _____

Total Enclosed: \$ _____

(make checks payable to **TriCounty Beekeepers Association**)

Number of hives you manage: _____ Total number of years beekeeping: _____

If you have beekeeping experience, would you like to be a mentor? YES NO

Would you like to have a mentor contact you? YES NO

Please check any of the following areas you may be interested in. The committee chair will contact you.

WE APPRECIATE VOLUNTEERS!

____ Executive Committee ____ Fair Committee ____ Audit Committee
____ Education Committee ____ Swarm Committee ____ Website&FaceBook Assistance