

Essex County Beekeepers Association Membership Application

If you are interested in beekeeping, we invite you to join us. Please fill out the application below. Applications received after October 1 are credited to the next year. Membership includes our monthly newsletter The Essex County Beeline

Name tags may be picked up at our meetings: See the librarian

| (please print) | | | | |
|---|-------------------|---|---------------------------|--|
| t Name: First Name(s): | | | | |
| Spouse/Partner name if different from above: | | | | |
| Address: | dress: City/Town: | | | |
| State: Zip +4 digit Ph | one: (home) | (cell) | | |
| E-mail address: Please print clearly | | | | |
| Newsletters are normally emailed. If you need it by regular mail, check here: | | | | |
| Check only one: Single: (\$15) Family: (2 adults & any dependents under age18 living in same household) Senior: (over 65 and 5 yrs consecutive paid dues) | | | | |
| Please add my name to a list available to the public of persons available to offer educational resources, talk at schools, meetings, etc. | | | | |
| Please add my name to a list available to the public of persons available to assist with swarms. | | | | |
| | | | | |
| Name Tags: \$5.00 each. Please print the name(s) as you would like it to appear on the name tag and enclose payment. | l | I would like to volunteer my time, talent and/or assistance in the following areas: | | |
| | Bee \$ | School | Meeting setup/ cleanup | |
| | Annu | ual Banquet | Host summer meeting | |
| | | ey Ambassador orogram | Library | |
| | Tops | field Fair | Newsletter | |
| Mail to: Membership Secretary Essex County Beekeepers Assn | Scho | olarship | Photo/Video | |
| PO Box 10 | | | Web site | |



Topsfield, MA 01983-0010