



## Haywood County Beekeepers Chapter

Membership Application/Renewal

\$10 Individual County Membership

**OR**

\$15 Spouse or Family Membership (*same mailing address*)

\$5 Student Membership (*through college*)

\$15 NC State Beekeepers Membership (*optional*)

### Member Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

County: \_\_\_\_\_ Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Today's Date: \_\_\_\_\_ (*mo.-day-year*)

### Membership Type (*check one*)

Renewal

New Member

### Payment Method (*check one*)

Check

Cash (*onsite only*)

### Spouse or Family Member (*Family membership only*)

Name: \_\_\_\_\_

### Other Information / Preferences: (*check all that apply*)

I already have bees

Would

like to have a mentor

I need bees

Willing to

be a mentor

I need apiary assistance

Add me to

the swarm list team

2022 Bees Academy School -\$50 each

Make Check Payable to **Haywood County Bee Club** and return this form with check to:

### Haywood County Bee Club

P.O. Box 1391  
Clyde, NC 28721