



# **RICHLAND AREA BEEKEEPERS' ASSOCIATION**

## **2018 Membership Application/Renewal**

**Date** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Name(s)** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

**City, State** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**County** \_\_\_\_\_ **Phone** (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Email** \_\_\_\_\_

**New Member(s)** \_\_\_\_\_ **Renewal** \_\_\_\_\_ **Member since (year)** \_\_\_\_\_

**Dues: \$15 Individual, \$20 Family (2 or more people living at the same address)**

**Make check payable to: Richland Area Beekeepers' Association**

**Please bring completed form and payment to the next meeting or mail to:**

**Pamela Ellis, Treasurer**

**3463 Needham Road**

**Lexington, OH 44904**