

COLUMBIANA & MAHONING COUNTY BEEKEEPERS' ASSOCIATION, INC.  
2023 Membership Application

**Check one:**

- Individual Membership \$10.00 (A voting member)  
 Family Membership \$15.00 (Two membership votes maximum and must reside at same address)  
 Junior Membership \$10.00 (A voting member but according to Ohio law, members under age 18 may not hold office)

**Primary Member Name:** \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_ County: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**Family Member Name:** \_\_\_\_\_

Cell:(\_\_\_\_) \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

TODAY'S DATE: \_\_\_\_\_

\$ \_\_\_\_\_ Individual Membership (\$10.00)

\$ \_\_\_\_\_ Family Membership - must reside at the same address (\$15.00).

\$ \_\_\_\_\_ **Total Enclosed**

I am willing to receive newsletters by email only.

I would like to be added to the 2023 Swarm List.

I am willing to be a mentor.

I am willing to speak at meetings or education outreach events.

I/We have been keeping bees' \_\_\_\_\_ years. I/We have \_\_\_\_\_ hives.

Please use the back of this form to tell us what you are interested in learning more about during the upcoming year. What programs would you like to see the association offer?

Dues are payable the first meeting of the calendar year. Membership may begin in any month. Dues paid during the interim carry to the end of the calendar year.

Please complete this form and return it, along with the dues, in an envelope at the next meeting or mail to **Columbiana and Mahoning County Beekeepers Association, P.O. Box 420, Columbiana Ohio 44408**. Make checks payable to: **COLUMBIANA & MAHONING COUNTY BEEKEEPERS' ASSOCIATION, INC.**