

KEARSARGE BEEKEEPERS ASSOCIATION

2014 MEMBERSHIP FORM

Name(s) _____

Street or PO Box _____ Town _____

State _____ ZIP _____ Phone _____

E-Mail _____

Check: New or Renewal

May we share your contact information with other members? Yes or No

I would like to receive my newsletter by downloading it from the club website _____
(Saves \$ for the club) www.kbanh.org

OR

Please send a printed newsletter to my mailing address above _____

2014 DUES ARE \$15.00 PER FAMILY
2015 DUES WILL INCREASE TO \$20.00

Please make checks payable to: **KBA**
MAIL TO: Robin Gray
PO Box 275
Warner, NH 03278