

WESTERN APICULTURAL SOCIETY

MEMBERSHIP FORM



Name _____
First Last

Address _____
Street

City Prov/State Zip Code

Phone _____ **Email** _____

Tell us about yourself

Full time beekeeper? ____ If not, what other field do you work in? _____

of colonies? _____

How long have you kept bees? _____ years

Age group (circle one) under 25; 25 - 40; 40 - 65; 65 or over

New membership _____ **Renewal** _____

I prefer ____ print copy or ____ email notification when each issue of the WAS Journal is posted online. FOR PRINT COPIES, **ADD \$20/YEAR SUBSCRIPTION FEE**

Indicate your membership level below:

- Individual\$20.00 US
- Junior\$15.00 US
- Senior\$15.00 US
- Senior Couple\$20.00 US
- Couple.....\$30.00 US
- Association\$20.00 US
- Commercial\$100.00 US
- 10-Year\$200.00 US
- Couple 10-Year.....\$300.00 US
- Benefactor\$500.00 US
- Patron.....\$1000.00 US

Payment

Dues for the year(s) _____ \$ _____

Subscription fee, if applicable
 (\$20/yr print copy of WAS Journal) \$ _____

Make check payable in US funds to
 Western Apicultural Society.

Mail to:

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