



NEBRASKA
BEEKEEPERS ASSOCIATION

Membership Form

If you have any questions about the membership process or the association, email nbaboard@nebraskabeekeepers.org.

Date: _____

Name(s): _____

Address: _____

City/State/Zip: _____

County: _____

Phone [] Home [] Mobile: _____

E-Mail: _____

Membership: [] New Member [] Renewal

Duration: [] \$15, 1 year [] \$30, 2 years [] \$250, Lifetime

Payment: [] Cash [] Check# _____ [] Charge

Make checks payable to: "Nebraska Beekeepers Association"

Card #: _____ Exp. _____ CSV _____

Mail form and payment to: Nebraska Beekeepers Association
Attn: Kat Scholl, 2614 W. South Street #216, Lincoln, NE 68522

How would you like to receive your newsletter? Select One.

[] Please send my newsletter by e-mail.

[] Please send my newsletter by the postal service.

YES NO

___ ___ Are you new to beekeeping (within 2 years)?

___ ___ Would you be interested in volunteering at NBA events?

___ ___ Would you be interested in becoming a mentor?

___ ___ Do you like the Nebraska Beekeepers Facebook page?

***Note: Send ONLY membership forms to Kat Scholl.*

***Send magazine subscriptions and payments to the magazine publisher.*

****Special rates on "American Bee Journal" with membership to the state association.*