




Central Washington Beekeepers Association (CWBA)

Membership Application

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|---|---|--|--------------|-----|
| Membership Dues are \$40.00 | | Renewal | Member since | New |
| Name:- | | | | |
| Address Street:- | | | | |
| City:- | | State / Zip code:- | | |
| Telephone Home/Cell:- | | Cell:- | | |
| Email Address 1 :- | | 2 :- | | |
| Would you like to receive a Text message when we send out Association emails:- Yes <input type="checkbox"/> No <input type="checkbox"/> | | | | |
| Share your name and email with other association members:- Yes <input type="checkbox"/> No <input type="checkbox"/> | | | | |
| Interested Community Member:- <input type="checkbox"/> | | Sideline keeper with 26 to 300 hives:- <input type="checkbox"/> | | |
| Backyard keeper with up to 25 hives <input type="checkbox"/> | | Commercial keeper with over 301 hives:- <input type="checkbox"/> | | |
| Would you like to be added to Swarms collection list if so <i>obtain additional form from the Association Swarm Coordinator.</i> | | | | |
| Association Notes:- | Membership Dues /Donation of \$ 0.00 paid ____ / ____ /2018 | | | |
| | Cash:- <input type="checkbox"/> Check:- <input type="checkbox"/> Check #-: <input type="checkbox"/> | | | |
| | <i>Membership Renewal date is 01/01/2019</i> | | | |
| | Approved 501(C)3 Status | | | |
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| <p>CWBA</p> <p>Membership Dues/Donation Receipt</p> <p>Dues / Donation to the total of \$ 0.00 paid on ____ / ____ /2018</p> <p>Cash <input type="checkbox"/> Check <input type="checkbox"/> Check # _____ Received by _____</p> <p>Membership Renewal Date is 1/1/2019</p> |  |
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