

PEMI-BAKER BEEKEEPERS ASSOCIATION

MEMBERSHIP DUES FORM

Name (s) please print		Date
Street or PO Box Address		
Town	State	Zip Code
Phone	E-mail	
New Membership \$10.00 (Ir	ndividual or Family)	
Renewal Fee \$10.00 (Individ	dual or Family)	
Donation to PBBA		
Please make checks payable to: Per	mi-Baker Beekeepe	rs Association
And send with this form to: Pemi-Baker Beekeepers Association PO Box 546 New Hampton, NH 03256	on	
☐ I have read the PBBA Liab	oility Waiver	
Membership payments are due in J payed to the Club Treasurer at a club	•	ming year. These can be
Daggived by DDD A Transurar		