

**Application for Membership in the  
Surry County and North Carolina State Beekeepers Association**

Check one:  New Membership  Renewal      MEMBERSHIP # \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

County of Residence: \_\_\_\_\_

Local Chapter (if applicable): \_\_\_\_\_ Surry County Beekeepers Association \_\_\_\_\_

Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

The NCSBA Privacy and Communication Policy is posted at  
<http://www.ncbeekeepers.org/ncsba-privacy-and-communication-policy>  
Please indicate your email preferences by checking the appropriate boxes below.

I DO NOT want to receive a printed copy of the Yellow Book:

I want to receive the NCSBA quarterly *Bee Buzz* newsletter by (check ONLY ONE):

EMAIL       US MAIL       NONE (I don't want it)

I want to receive notices of bee-related **EDUCATIONAL** opportunities by email:      YES       NO

I want to receive bee- and beekeeping-related **SOLICITATION** emails:      YES       NO

***SCBA REMINDERS AND SPECIAL UPDATE EMAILS: Do you want to receive special updates from SCBA via email? Yes  No***

Note: Members will receive meeting reminder postcards about a week before the next meeting. Changes to meeting dates, speakers, and special events are sent via email only.

**MEMBERSHIP TERMS ARE JANUARY 1 THROUGH DECEMBER 31 ANNUALLY**

1. I am enclosing annual **Individual SCBA Membership** dues of **\$25.00** for the year:
2. I am enclosing annual **Commercial SCBA Membership** dues of **\$40.00** for the year:

Payment by cash or check. If paying by check, please make **check payable to Surry County Beekeepers Association** and **mail or deliver** with this completed form to:

Surry County Beekeepers Association  
Surry Extension Office  
P.O. Box 324  
210 North Main Street  
Dobson, NC 27017