

NORTHERN ILLINOIS BEEKEEPERS ASSOCIATION

2023 APPLICATION FOR MEMBERSHIP

Affiliated with the Illinois State Beekeepers Association (ISBA)

Check one:	Renewal individua	l Membership	Renewal Family Membership
Check one: (Includes Sing each)	NEW Individual M le Membership in the Illinois	•	<u>NEW</u> Family Membership - \$35 association, additional ISBA memberships, \$10
If applying after February 28, 2023 and you are a renewing member, please add \$5.00.			
Name(s):	•		
Address:			
City:		State:	Zip:
Phone:			
Email addre	ess (if family membership	, include all emails	s. Newsletter will be sent to all emails):
Y	es, I would like to order a N	IBA name tag(s), add	d \$10 per name tag.
Name	tags should read (please pr	int):	
Please tell us more about yourself:			
I have been a I	NIBA Member since	(year)	I plan to have colonies/hives this season
I have been a b	peekeeper for about	years	I am a Master Gardener/Beekeeper
Check all that	applies:		
I sell honey	_ willing to Coach/Mentor _	Swarm Catcher	willing to remove Bees from buildings
Personal skills I would be willing to donate to NIBA (i.e. Beekeeping experience, accounting, webmaster, event			
planning, community education, carpentry, legal, business management, retail knowledge, other)			
Complete	this form and amail after t	vou have completed	l your electronic payment to: rbrindise@att.net.
Complete	cuis ioini and email after y	you have completed	your electronic payment to. Inimusewatt.net.

Or you may send the completed form along with a check payable to NIBA and mail to NIBA, c/o Ralph Brindise 517 Northlake Rd, Lakemoor, IL 60051