



A chapter of the Maine State Beekeepers Association
2024 Membership Form

NAME: _____

ADDRESS: _____

CITY, STATE, POSTAL CODE: _____

PHONE NUMBER: _____

EMAIL ADDRESS: _____

____ INDIVIDUAL MEMBERSHIP \$10

KLCB membership for one person for the 2024 year

____ FAMILY MEMBERSHIP \$15

A Family membership shall consist of one or both parents and any children under 18 years of age for the 2024 year.

____ LIFE TIME MEMBERSHIP \$120

Life Membership is a one-time payment of \$120

FAMILY MEMBERS:

(1)

NAME: _____

EMAIL: _____

(2)

NAME: _____

EMAIL: _____

(3)

NAME: _____

EMAIL: _____

Please make checks payable to KLCB and return to:

Sandi Panati

1252 Middle Road

Dresden Maine 04342