

# York County Beekeeper's Membership Application 2022

LAST Name: \_\_\_\_\_ FIRST Name: \_\_\_\_\_

Address \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Number: \_\_\_\_\_

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

If you were referred by or sponsored by a current or past member, please provide:

Member's Name: \_\_\_\_\_

Do you have bees now? YES or NO

Have you ever been a member of the York County Beekeeping Association (YCBA)? YES or NO

**Membership process of the YCBA is as follows:**

Prospective member must fill out an application which includes reading the By-Laws, sign and submit to a current member or to an officer at a regular scheduled meeting or mail to: YCBA, P.O.Box 2172, York, SC 29745

Visit the YCBA website: <https://yorkcountybeekeepers.com>

and the By-Laws can be found on the "About Us" tab, under Who We Are, then under Group By-Laws.

Upon acceptance, the applicant will become a member of the YCBA with full privileges and voting rights.

Membership dues of \$20 will be due January 1st of each year thereafter.

I agree to read the By-Laws of the YCBA and will advise an officer if I feel the terms, conditions and principles of the membership is something I cannot abide by.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_