

California State Beekeepers Association, Inc.  
 1521 I Street, Sacramento, CA 95814  
 (916) 441-0302 [castatebeekeepers@hotmail.com](mailto:castatebeekeepers@hotmail.com)  
[www.californiastatebeekeepers.com](http://www.californiastatebeekeepers.com)

Name \_\_\_\_\_  
 Additional adult family member(s)\* \_\_\_\_\_  
 Company name \_\_\_\_\_  
 Company employee(s)\* \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_ Zip \_\_\_\_\_  
 Phone (    ) \_\_\_\_\_ Fax (    ) \_\_\_\_\_ E-mail \_\_\_\_\_

**2017 ANNUAL MEMBERSHIP RENEWAL**

- ANNUAL DUES (Please check appropriate  below.)
- Commercial Full Time \$150     Associate \$75
- Commercial Part Time \$100     Friend (all others) \$50
- Affiliated Club \$150     Packer, Supplier, Dealer \$150

\*Each dues payment results in only 1 membership card & vote. Total Membership Dues \$ \_\_\_\_\_

**RESEARCH FUND DONATION** (voluntary contribution) .....\$ \_\_\_\_\_

**KING BEE DONATION** (voluntary contribution, minimum of \$250\*\*) .....\$ \_\_\_\_\_

**RIGHT TO FARM DONATION** (voluntary contribution\*\*) .....\$ \_\_\_\_\_

\*\*Donor may ask to be recognized in the BEE TIMES.    TOTAL ..... \$ \_\_\_\_\_

Mail to above address. Make  
checks payable to CSBA, Inc.

Office use only

Date \_\_\_\_\_ Check # \_\_\_\_\_

Pd. \_\_\_\_\_ Mem # \_\_\_\_\_

Check     Cash