

BEGINNING BEEKEEPER COURSE

Type of Registration:

Individual

Family

Number of family members: ____

Contact Information

Name: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Telephone: Home: _____

Cell: _____

Email: _____

I am enclosing the fee for the Beekeeping Beekeeper Course

I am enclosing \$50.00 for individual registration

I am enclosing \$70.00 for a family registration

Make check to Howard County Beekeeper's Association

Send form and payment to:

Howard County Beekeeper's Association

P.O. Box 1416 Ellicott City, MD 21041