



Randalstown & District Beekeepers Association

MEMBERSHIP & INSURANCE FEES

Full Name:

Address:

.....

.....

..... Postcode:

Tel: Mob:

Email:

MEMBERSHIP (£10.00 per person) No. of people:

INSURANCE (please indicate below the fee applicable)

Single: **£7.00** Double: **£8.00** Family: **£9.00** No bees: **£1.00**

alternatively: I pay my beekeeping insurance through the following organisation;

..... BK Association or BBKA/INIB

MEMBERSHIP (total amount due):

INSURANCE (total amount due):

Signed: Date:

Please make cheques payable to **Randalstown Beekeepers Association**, cross it A/C Payee and sent to:
Susie Hill, Membership Secretary, 7 Nutts Corner Road, Crumlin, Co. Antrim BT29 4BW