

**ANNE ARUNDEL BEEKEEPERS ASSOCIATION (AABA)
ANNAPOLIS, MARYLAND**



To become a member of AABA, please provide the following information:

Name: _____
Address: _____

Phone: _____
E-Mail: _____

If you would like your hives included on our “Honeybee Map” on the AABA website, please give us permission to include any/all of the following:

Please note that your address will never appear on this map; we simply post a general vicinity of hive locations.

List site: ____ Yes ____ No
Number of Hives: ____
Business E-mail: _____
Business phone: _____

Include your email and phone number only if you want to let the public know that you have honeybee products for sale.

Dues are \$5.00 annually. Annual dues cover the period from January 1 to December 31. Please make your check of payable to **AABA**.

You may make your payment at the AABA meeting held in February of each year.

Should you prefer to mail your membership fee, please use the following address:

AABA
P.O. Box 152
Galesville, MD 20765

Check our web site, <http://aabees.org/>, for information about our association.

Please use the “Subscribe” feature on our website to receive AABA email messages.

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