

MANITOBA BEEKEEPERS' ASSOCIATION

2022 APPLICATION FOR MEMBERSHIP

January 1, 2022 to December 31, 2022

NAME: _____	COMPANY NAME: _____
MAILING ADDRESS _____	POSTAL CODE _____
TELEPHONE _____	EMAIL ADDRESS _____
NUMBER OF COLONIES EXPECTED TO BE OPERATED IN 2022 _____	

Payment Due January 1, with Deadline for membership payment – March 31, 2022

MEMBERSHIPS

1. **Associate Membership** (A Volunteer, non-voting category, for beekeepers with 49 or fewer honey bee colonies in Manitoba, or a local or out-of-province industry supporter)

\$60.00

2. **Full Membership** (A Producer who keeps 50 or more honey bee colonies in Manitoba, and who is a sole proprietor, or is the Designated Representative of a partnership, corporation, or Hutterite colony)

Base Fee	\$200.00
Levy (50 to 1000 colonies)	Colony number @0.45 per colony
Additional Levy (1001 or more colonies)	Colony number (Total minus 1000) @0.14 per colony
TOTAL (Base Fee plus Levy plus Additional Levy)	

3. **INSTITUTION** – A Non-Canadian individual, organization, or entity, serving as a broker or library, requesting the MBA newsletter for reference material or other use. \$100.00US

BEE RESEARCH FUNDS-DONATIONS

BARRY FINGLER MEMORIAL FUND (Manitoba Beekeepers' Association)	
CANADIAN BEE RESEARCH FUND (Canadian Honey Council)	
KNOWLEDGE RESEARCH TRANSFER PROGRAM (cash or in-kind donation, please contact Secretary)	

INSURANCE (see MBA website *Bees-Protection for details*) **Not available after March 31**

BEEKEEPERS LIABILITY INSURANCE (valid 5 May 2022-5 May 2023) @ \$70.20 per year	
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JOURNAL SUBSCRIPTIONS - (THIS SERVICE AVAILABLE TO MBA MEMBERS ONLY) **Not available after March 31**

AMERICAN BEE JOURNAL - \$60.00 per year	
BEE CULTURE - \$55.00 per year	

TOTAL AMOUNT \$ _____

I request that the above amount be deducted from my account at the Manitoba Co-operative Honey Producers Limited.

THERE IS NO "AUTOMATIC" DEDUCTION FOR PAST MEMBERS.

Applicants, please approve deduction by initialing here. _____

THANKS FOR YOUR SUPPORT. INFORMATION MAY BE USED TO PROVIDE PRODUCTS OR SERVICES BENEFITIAL TO MEMBERS.

APPLICATION DATE: _____ APPLICANTS SIGNATURE: _____

Please return this completed application together with payment to:
 Manitoba Beekeepers' Association
 PO Box 48123 Lakewood PO
 Winnipeg, MB, R2J 4A3