



GCBA Membership Form

Member Information

First Name _____

Last Name _____

Cell Phone _____ Work Phone _____

Email _____

Street Address _____

City _____ State _____ Zip _____

County _____ DOB (Month & Day Only) _____ / _____

If you are filling this out and sending in for another individual, please fill out the form with their information. Please List a valid email address as this is how we will notify you should any changes arise to the meeting schedule and it is also how the GCBA will send out newsletters and other important notifications.

Membership dues are **\$15.00**, annually, dues are not prorated expire December 31st of the calendar in which they are paid regardless of when during the calendar year they are paid. **We will accept checks, cash, or money orders.** For checks and money orders make them payable to **GCBA or Gaston County Beekeepers Association**. Mail payment and membership form to:

ATTN: GCBA

PO BOX 210

Dallas, NC 28034