



SOUTHERNS BEEKEEPING ASSOCIATION

GAUTENG PROVINCE AND COUNTRY DISTRICTS

MEMBERSHIP APPLICATION 2011

PERSONAL PARTICULARS

Surname: Title: Initials:

First name/s: ID number:

Postal Address: Tel: (Home): (.....)

..... (Work): (.....)

..... Fax: (.....)

Code: Cell:

Physical Address: E-Mail:

..... Marital Status.....

..... Code: Spouse/Partner's Name:

EXPERIENCE

Are you: (a) an experienced beekeeper?

(b) have some knowledge of beekeeping?

(c) have very little or no knowledge of beekeeping?

How many hives do you have? _____

Are you able and competent to carry out Bee Removals? _____

SABIO REGISTRATION

Beekeepers are required by law to be registered to the **South African Bee Industries Organisation – SABIO**. Annual fees to **SABIO** amount to R250.00 per year. (Contact SABIO Administration at 021 870 2900 or e-mail info@sabio.org.za.)

Are you registered? Yes / No If so, what is your registration number?

*P.O. Box 912,
Randpark Ridge, 2156,
Gauteng,
South Africa.*

*E-Mail: bees.mikem@mweb.co.za
Website: www.beekeepers.co.za
Tel - Chairman: 082 893 1590
Facsimile: 011 476 6308*

FEES

Current fees to belong to **Southerns Beekeeping Association** for the **2011 Calendar year** are:

Membership	Fee	Please Indicate
Ordinary Member	R240.00 per year	
Family Member (Husband & Wife & children under 18 years)	R350 per year	
Pensioner (over 65 years & Retired)	R180.00 per year	
Country Member (residing outside Gauteng Province)	R150.00 per year	

CONDITIONS OF MEMBERSHIP

Any person who joins the Association after the 1st July shall pay a fee for the remainder of the year which shall be half the fee as stated above.

Any current member as at the close of the calendar year shall be presumed to intend extending his/her membership for the following year unless they notify the Committee of their intention to discontinue their membership prior to the 31st December.

Annual renewal fees shall be invoiced at the commencement of each calendar year. Any member who has not paid his renewal fees within three months of the issue of such renewal notice may be deemed to have chosen not to renew his/her membership of Southernns and his/her name may be removed from all correspondence and notifications regarding Association activities.

All members are required to conform to the **Association's Constitution** and to act in accordance with the **Association's Code of Conduct**.

I HEREBY WISH TO APPLY FOR MEMBERSHIP OF **SOUTHERNS BEEKEEPING ASSOCIATION** AND AGREE TO THE CONDITIONS OF MEMBERSHIP AS STIPULATED ABOVE.

SIGNED

DATE

METHOD OF PAYMENT

EFT:

CHEQUE:

CASH:

For Electronic Banking purposes please transfer Membership Fees into:

**ABSA Bank, Cresta Branch, Code 632005,
Account No. 906 194 0886**

**Reference your deposit with your "name + subs + year";
(e.g. "Bloggs Subs 2009")**

INTRODUCTION

NEW MEMBER INTRODUCED BY: _____

INTRODUCING MEMBER: _____

SIGNED

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