



Registration form

NAME.....

ADDRESS.....

.....Code.....

PHONE NO/s.....

EMAIL.....

NUMBER OF BEE COLONIES.....

I the undersigned hereby apply for membership of the KwaZulu-Natal Bee Farmers Association. If accepted as a member I undertake to adhere to the rules of the Association.

SIGNED.....

DATE.....

Subscription Fees: Adult R250-00

Junior R150-00

Please make cheques payable to: KwaZulu-Natal Bee Farmers Association or direct deposit into FNB Account 52550007838 at the Boom Street Branch 221325

SABIO or DAFF registration number

SABIO (South African Bee Industry Organisation)