

Let's Start Beekeeping Course May 28 and May 29, 2016

REGISTRATION FORM

Name:					
Contact Information:	Phone No: () _ Email:				
Do you wish to purchase	e an OBA Beekeepii	ng Man	nual? (\$30.00)	YES	NO
Do you have a beekeep	er's hat with veil?	YES	NO		
Do you currently have b	ees? YES NO				
		Signat	ture		
*Please submit a non-refund Beekeepers' Association.	dable deposit of \$50.00.	Cheques	s are to be made pay	vable to Thui	nder Bay
Form of Payment: CAS	SH CHE	EQUE	_		
For Administration Use Only	r:				
Deposit Paid:					
Balance Paid:					