Beekeepers Guild of Southeast Virginia

Application for Membership

An individual or family membership is $20 annually.

Date: _____

Name: _____
(yours) (spouse)

Address: _____
(street) (city) (state) (zip)

Phone: _____
(home) (cell) (work)

Email address: _____

How long have you been keeping bees? _____

How many hives do you have now? _____

How did you hear about us? _____

Please make your check payable to BGSV and mail to:

Beekeepers Guild of Southeast Virginia
P.O. Box 16516
Chesapeake, VA 23328

Beekeepers Guild of Southeast Virginia
Contact Information Release

Please fill out only the contact information that you want the guild to publish and indicate where you would like the information published. When you are finished, sign the form and return to:

Beekeepers Guild of Southeast Virginia
P.O. Box 16516
Chesapeake, VA 23328

Enter Information **Please Print**		**Indicate where the guild may publish your contact information (Yes/No)**		
		Printed Roster	Public Web-roster	Private Web-roster
Last Name				
First Name				
Spouse				
Street Address				
City				
State				
Zip Code				
Home Phone				
Cell Phone				
Email Address				

Member Information Privacy Statement:

The guild never shares your personal information with the public or other guild members without your written consent.
If you want to have any contact information included on the guild's printed roster or the public or private web roster, you must give your permission in writing.
Once you have authorized release of your contact information, the guild assumes no responsibility for it's subsequent use. **I have read and understand the Privacy Statement and I give my permission for The guild to publish the information indicated above (Signature)**_____ (Date)_____