



Minnesota Honey Producers Association Membership Form 2024

Name: _____

Company Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Telephone: _____

Email: _____

Annual Dues

		Qty	=	Total
Hobby (Less than 20 Hives)	\$25.00	x _____	=	_____
Sideliner (21 to 100 Hives)	\$35.00	x _____	=	_____
Commercial (101 + Hives)	\$45.00	x _____	=	_____

**Dues include a 1 year MHPA membership and 3 electronic issues of "The Minnesota Beekeeper" Newsletter.*

Donations

Hadak Research Fund: \$ _____
Furgala Scholarship Fund: \$ _____
TOTAL : \$ _____

Make checks payable to: MHPA

**Mail to: Minnesota Honey Producers Association
c/o Sara Keskey-Rufer
P.O.Box 336
Cokato, MN 55321**