



Iowa Honey Producers Association Annual Membership Form 2022

Our membership year runs from January 1 through December 31.
The expiration date will be above your mailing address on "The Buzz"
One copy of "The Buzz" will be sent per household address

Please print legibly.

PRIMARY MEMBER \$20.00 \$ _____

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

COUNTY: _____ DISTRICT: _____

E-MAIL ADDRESS: _____

PHONE NUMBER: _____

SECOND MEMBER at the same address \$5 \$ _____

NAME: _____

E-MAIL ADDRESS: _____

NEXT MEMBER at the same address \$5 \$ _____

NAME: _____

E-MAIL ADDRESS: _____

Additional Years of Membership + Donations:

Additional year(s) of membership	PRIMARY	# OF YEARS _____	at \$20	\$ _____
Additional year(s) of membership	NEXT	# OF YEARS _____	at \$5	\$ _____
Additional year(s) of membership	NEXT	# OF YEARS _____	at \$5	\$ _____
Fairbooth Renovation Fund - Funds to be used for improvements				\$ _____
General Fund - Funds to be used for day to day expenses				\$ _____
Queen Fund - Funds to be used to help the Queen in her travels				\$ _____
Youth Program - Funds to be used to provide students with needed supplies				\$ _____
Lee Heine Scholarship				\$ _____
Sub-total				\$ _____

I prefer to receive "The Buzz" newsletter via Email Mail Both

Because of an increase in postage, mailed copies of The Buzz will have an additional \$10 fee \$ _____

TOTAL	\$ _____
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May we publish our information in the Association Directory YES NO

I would like to be contacted about ideas I have for the IHPA, and to learn more about serving on committees YES NO

I would like to be a Mentor for the Youth Scholarship Program YES NO

If you would like to pay via credit/debit card, please send an e-mail with your registration form to: ihpatreasurer@gmail.com
to receive a link to pay online via credit/debit card

Please make checks payable to: **Iowa Honey Producers Association or IHPA**

For Mailed Payments (check or cash) Lisa Montgomery, 2543 170th St Livermore, IA 50558

For Office Use: Pmt Rcvd _____ Check # _____ Amount _____ Entered _____