



Introduction to Beekeeping Class

January 27, 2018

Registration Form

First Name	Last Name
First:	Last:
First:	Last:
First:	Last:
Address:	
City:	County:
Home phone:	Cell phone:
E mail:	Dietary restrictions?

Member T-shirt size _____ (Note one per family membership)

How did you hear about us? _____

Class price: \$50.00

Each additional family member: _____ X \$10.00 \$ _____

Total: \$ _____

Mail registration form along with a check payable to: **Coweta Beekeepers Association**

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