



Central Oklahoma Beekeepers Association, LLC (COBA)



Membership Application Form

January 1, 2018 through December 31, 2018

Mailing Address:

COBA, 5030 N May Ave, Suite 264, Oklahoma City, OK 73112

Meeting Location:

Will Rogers Gardens Exhibition Center, 3400 NW 36th St, Oklahoma City, OK 73112

Meeting Dates: (Meetings are held 7:00~9:00 pm, usually on the 4th Thursday of each month.)

2018: Thursday 1/25, 2/22, 3/22, 4/26, 5/24, 6/28, 7/26, 8/23, 9/27, Friday 10/26 (OSBA meeting 9-5 Saturday 10/27, 12/?? (Christmas Party - Dues-Paid Members Only)

Membership \$15 per calendar year per household

Dues or Tuition Payments:

Checks: payable to **COBA** and mailed to the mailing address above or tendered at a meeting.

Paypal: sent via “Send Money” to **COBATreasurer@gmail.com**. Please use the “Add a Note” feature to include the information requested below, otherwise we may be unable to identify who is paying.

Personal Information is used only for official association business, and is not divulged to others inside or outside the association without your permission.

Applicant Information: (Please **PRINT** clearly)

Name (First, Middle, Last) _____

Address (#, Street, Apt) _____

Address (City, State, ZIP Code) _____

Phone: (xxx-xxx-xxxx) _____

Alternate Phone: _____

Email: (we.bee.ok@apis.com) _____

Alternate Email: _____

Please provide the names of other members of your household whom you wish to list as members:

If you have questions, feel free to email, text, or call 2017 COBA Officers:

| | | | |
|-------------------------|---------------|-------------------------------|--------------|
| President | Rick Hall | OKBees@gmail.com | 405-473-5680 |
| Vice President | Tonya Wells | TonyaWells@queenbrishoney.com | 405-314-8175 |
| Secretary | John Sharpley | Johnblr@icloud.com | 501-547-0170 |
| Treasurer (& Registrar) | Jay Silver | COBATreasurer@gmail.com | 405-464-0773 |

COBA Website: www.centralokbeekeepers.org

COBA Facebook Group: www.facebook.com/groups/CentralOkBeekeepersAssoc/



Central Oklahoma Beekeepers Association, LLC (COBA)



Beginning Beekeeping Class Enrollment Form

Mailing Address:

COBA, 5030 N May Ave, Suite 264, Oklahoma City, OK 73112

Class Location:

Will Rogers Gardens Exhibition Center, 3400 NW 36th St, Oklahoma City, OK 73112

Each class will be held on 2 Saturdays. Setup begins at 8:00 AM. Class begins **promptly at 8:45 AM**. Class should end 5:15-5:30 PM. We must be cleaned up and out of the building by 6:00 PM. Your assistance is appreciated for both setup and cleanup.

We encourage you to **bring a lunch**, since we will almost certainly teach through lunch. If we are ahead of schedule we'll take a lunch break, but the instructors will be available to answer questions during the lunch break. Light refreshments will be provided.

Tuition is \$100 for the first member of your household and \$35 per additional member of your household attending the class. Enrollment in each class is limited, so seats are not reserved until payment is received. A full refund of funds received is available if Treasurer is notified at least 1 week prior to start of class.

The course includes 2 days instruction, Q&A sessions, demonstrations, handouts, one beekeeping book and one hive tool per household. Weather permitting, we will examine a live colony on the afternoon of the second Saturday. Class time emphasis is on practical beekeeping knowledge, techniques, and equipment. Our goal is to prepare you for a successful first year of beekeeping.

Students are automatically COBA members for 2018 and Oklahoma State Beekeepers Association (OSBA) members until the OSBA meeting in the Fall of 2019.

If you have questions, please contact the Treasurer (listed on page 1 of this form).

To Enroll:

- Fill out the membership information on the other side of this form.
- Indicate below how many (1+?) members of your household will be attending, then add the amounts to determine the Total Tuition Amount.

| | | | | | | | |
|--|-------|---|--------|---|----|-------|-------|
| First member of household: | 1 | X | \$ 100 | = | \$ | 100 | |
| Number of additional members of household attending: | _____ | X | \$ 35 | = | \$ | _____ | |
| <hr/> | | | | | | | |
| Total Tuition Amount: | | | | | | \$ | _____ |

- Indicate your 1st, 2nd, and 3rd choices for which class to attend:

_____ February 3 & 10, 2018 _____ March 24 & 31, 2018
 (Room 1: 30 student max) (Room 1: 30 student max)

- Copy the completed form for your future reference.
- Pay the appropriate amount via one of the methods below. **Do not** include additional funds for COBA membership, since membership is included in your tuition.

Tuition Payments: (Membership Dues are INCLUDED in TUITION)

Checks: payable to **COBA** and mailed to the mailing address above or tendered at a regular COBA meeting.

Paypal: sent via **“Send Money”** to **COBATreasurer@gmail.com**. Please use the **“Add a Note”** feature to include full contact information, otherwise we may be unable to identify who is paying.