



WILL COUNTY BEEKEEPERS ASSOCIATION

2026 Membership Application

- ☐ **New Member \$30.00 (\$20.00** If you are already a paid-up member of the ISBA for 2026)
☐ **Renewal \$30.00 (\$20.00** If you are already a paid-up member of the ISBA for 2026)

First Name*: _____ **Last Name*:** _____

Street Address*: _____

City*: _____ **State*:** _____ **Zip*:** _____

E-mail* (E-mail Address is your User ID and must be valid): _____

Phone Number*: (____) ____-____ *** Required Fields**

Personal Website: _____ What year did you start beekeeping? _____

How many hives do you have? _____ How many hives in Will County? _____

What types of hives do you have?

Langstroth 10 frame [] Langstroth 8 frame [] Top bar [] Flow hive [] Other []

Do you wish to be listed for Swarm Removals? [] Do you wish to be listed for Honey Sales? []

Do you make Mead? [] Do you make equipment? [] Are you a full service dealer? []

Would you like to be listed as a Mentor? []

How did you learn about the Will County Beekeepers Association? _____

Membership runs from January 1, 2026 through December 31, 2026. \$10.00 of your dues goes towards membership in the Illinois State Beekeepers Association (ISBA).

If you are already a paid-up member of the ISBA (either independently or as a member of another Illinois bee association), the Will County Beekeepers Association payment will be \$20.00.

Please provide your ISBA Member ID number. _____

No Membership data will be sold or shared with the one exception of your name and address to ISBA.

Please make checks payable to: Will County Beekeepers Association

Bring your application and payment to our next regular monthly meeting or mail (check only) to:

**Will County Beekeepers Association
C/O Will County Farm Bureau
100 Manhattan Rd Joliet, IL 60433**