SOUTH AUSTRALIAN APIARISTS' ASSOCIATION

APPLICATION FOR MEMBERSHIP

Tax Invoice ABN: 70 114 388 350 (amounts are GST inclusive)

The Association's financial year runs from 1st May through to 30th April the following year.
Applications for membership can be made by completing the form below and returning to the SAAA Treasurer via email or post.

Mr/Mrs Ms/ Miss	Given Name(s)	Surname	Preferred Name (if different)

Address	Suburb	Post Code

Phone	Phone (Mobile)	E-mail Address
( )		

Company Name	Number of Hives	Region Located

Are you prepared to have your details included on the emergency breakdown list?	Are you willing to write a brief business bio or article to be included in The Buzz magazine?	*If you are not in a current Branch area, would you be willing to assist in establishing one?	Receive The Buzz magazine editions: (Circle one)
Y / N	Y / N	Y / N	Hardcopy (posted) / Digital (emailed)

NEW MEMBERSHIP ☐ **RENEWAL** ☐

Membership Fees for 2026-2027

	Category	Website Access	Votes	Fee
☐	Associate member*	Full Access including The Buzz online	1	$100.00
☐	1 – 50 hives	Full Access including The Buzz online	1	$100.00
☐	51 – 100 hives	Full Access including The Buzz online	2	$150.00
☐	101 – 200 hives	Full Access including The Buzz online	3	$200.00
☐	201 – 300 hives	Full Access including The Buzz online	4	$250.00
☐	301 – 400 hives	Full Access including The Buzz online	5	$300.00
☐	401 – 500 hives	Full Access including The Buzz online	6	$350.00
☐	501 – 600 hives	Full Access including The Buzz online	7	$400.00
☐	601 – 800 hives	Full Access including The Buzz online	8	$450.00
☐	801 – 1500 hives	Full Access including The Buzz online	9	$500.00
☐	1501 or more hives	Full Access including The Buzz online	10	$550.00

Payments can be made via direct bank transfer or cheque posted to the Executive Officer.
SA Apiarists' Association BSB: 633 000 Account No: 164 368 888 – Use Member name as reference

By becoming a member of the South Australian Apiarists' Association, you are agreeing to conform to the Rules as set out in the Constitution and abide by the Code of Conduct of Members and Executive Council.

Date: _____ Signed: _____

*Associate Member: an apiarist who has retired from the industry or a person interested in the welfare of the Association and industry. Rule 1 (b) of the Constitution.

This document becomes a Tax Invoice on payment.
Please retain a copy for your records.

EXECUTIVE OFFICER:
Michelle Cotton
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treasurer@saaa.org.au