Illinois State Beekeepers Association 123rd Annual Fall Meeting
Illinois Department of Agriculture Building, State Fairgrounds, Springfield, Illinois 62794
Saturday, November 8, 2014

- All attendees interested in the catered lunch must register and pay in advance - the registration form needs to be postmarked by November 3, 2014.
- Walk-in registrations (without the catered lunch) will be accepted on the day of the event.
- Registration opens at 7:30 am. The meeting will commence at 8:30 am and end at 4:30 pm.

Speakers

Dr. Jeff Harris, Mississippi State University – Breeding for Varroa Resistance and Varroa Mite Control
Dr. Dale Hill, Archer Daniels Midland – Honey Bee Nutrition
Dr. Robert Jean, Saint Mary-of-the-Woods College – Pollinator Habitat and Managing for Native Bees

Additional agenda information will be posted to the ISBA website (www.ilsba.com) as it becomes available.

REGISTRATION FEE INFORMATION:
$35.00 PER PERSON for ISBA members and spouse (lunch not included)
*You may complete the ISBA $10.00 annual membership application (available on the ISBA website: **ilsba.com**) and include it with your registration to register at the ISBA member rate.*
$45.00 PER PERSON for non-ISBA members (lunch not included)
$10.00 PER PERSON for catered lunch (fried chicken or vegetarian lasagna)

To register: Complete the form below and return with your check or money order payable to the Illinois State Beekeepers Association. Mail completed form to:

Illinois State Beekeepers Association
P.O. Box 21094
Springfield, IL 62708

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Illinois State Beekeepers Association Fall Meeting Registration Form for Saturday, November 8, 2014

Advance registration and lunch reservation must be postmarked by November 3, 2014.

Last Name _____ First Name _____

Address _____

City _____ State _____ Zip Code _____

Phone ( )_____ Email _____

Additional Attendee(s)_____

Affiliated ISBA Chapter (or member at large) _____

			Total
Number of ISBA member & spouse attendees	_____	@ $35.00 each =	$_____
Number of non-ISBA member attendees	_____	@ $45.00 each =	$_____
Number of Fried Chicken meal(s)	_____	@ $10.00 each =	$_____
Number of Vegetarian Lasagna meal(s)	_____	@ $10.00 each =	$_____

TOTAL PAYMENT ENCLOSED $_____