

**Wisconsin Honey Producers Association Fall Convention**  
**November 4 - 5, 2022 @ Embassy Suites, Brookfield**  
**1200 S Moorland Rd      262-782-2900**

Primary Registrant Name \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Email Address \_\_\_\_\_

How would you like to receive your Badger Bee? (Circle only one)    Print by mail    or    email  
 Share my name with members?    Yes    or    No

Membership Dues:      Primary      Additional      **Total Dues**  
                                  \$40.00      \_\_\_\_\_ x \$15.00    Enter name(s) below     

If you are registering as a family, please provide the first and last names and email address of everyone attending:

Additional Member or Registrant:
Additional Member or Registrant:
Additional Member or Registrant:
Additional Member or Registrant:
Additional Member or Registrant:

	Early Registration Thru 10/10		Regular Registration 10/11 to 10/25		On-site Registration After 10/25		<b>Total</b>
	<b>Member</b>	<b>Non- Member</b>	<b>Member</b>	<b>Non- Member</b>	<b>Member</b>	<b>Non- Member</b>	
Single	\$ 60.00	\$ 85.00	\$ 70.00	\$ 95.00	\$ 80.00	\$ 105.00	
Family*	\$ 90.00	\$ 115.00	\$ 100.00	\$ 125.00	\$ 110.00	\$ 135.00	
Single Day Rate	\$ 45.00	\$ 70.00	\$ 55.00	\$ 80.00	\$ 65.00	\$ 90.00	
Family* Day Rate	\$ 60.00	\$ 85.00	\$ 70.00	\$ 95.00	\$ 80.00	\$ 105.00	

\*Family is defined as two adults and any children (under 18) living in the same household.

Enter name(s) above \_\_\_\_\_

	<b>Number attending</b>	<b>Cost</b>	<b>Total</b>
Friday Luncheon	<u>                    </u>		*****
Saturday Banquet	<u>                    </u>	x    \$40.00	<input style="width: 100px; height: 20px;" type="text"/>

Program Donations: Honey Queen \$ \_\_\_\_\_ Research \$ \_\_\_\_\_ General Fund \$ \_\_\_\_\_ Youth \$ \_\_\_\_\_

Questions? Email: Shelly @ astle.shelly@gmail.com or call 608-489-2456      Total Submitted

Have any services that you wish to advertise on wihoney.org? Honey \_\_\_ Candles \_\_\_ Beeswax \_\_\_ Pollination \_\_\_ Swarm Removal \_\_\_  
 Make checks payable to **WHPA** and mail **White** copy to: Shelly Astle, WHPA Treasurer, S4131A State Hwy 80, Hillsboro, WI 54634