



Jump Starter Program Application

Beekeeper Information

Name		Age	
Street address			
City/State/Zip			
Email address			
Phone number			
Local club name			
Beekeeping experience <small>(attach an additional page, if extra space is needed)</small>			
Parent name (if under 18)			
Street address			
City/State/Zip			
Email address			
Phone number			
If selected, which package would you choose? (A/B/C/D)			

Mentor Information

Name	
Street address	
City/State/Zip	
Email address	
Phone number	
Local club name	
Years of beekeeping experience	

Send completed application to:
Jump Starter Program
 8903 E 350 S
 Dugger, IN 47848

For questions, contact Bill Spurlin by phone (812.699.1444) or email (Bspurlin60@yahoo.com).