



P.O. Box DV 634 • Devonshire DV BX
E-mail: bhpa@outlook.com

2023/24 Membership Application & Renewal Form

New Member Renewal please select
[membership expires 31st August of each year]

Member / Family Name: _____

Mailing Address: _____

_____ Postal Code: _____

Cell Phone: _____ Work Phone: _____

E-Mail: _____

Tick one	MEMBERSHIP TYPE	MEMBERSHIP FEE
<input type="checkbox"/>	INITIATION FEE (all new members)	\$20.00
<input type="checkbox"/>	JUNIOR	\$15.00
<input type="checkbox"/>	ADULT	\$25.00
<input type="checkbox"/>	FAMILY*	\$50.00

Name(s) of additional family member(s): _____

_____ Amount Enclosed \$ _____

Check Cash

FOR ALL ELECTRONIC PAYMENTS:

BHPA BDC Bank of N.T. Butterfield & Son Limited 20-006-060-055546-100

Please make reference in the beneficiary notes field to include: Member Name/Family and return to bhpa@outlook.com or together with Entry Form. Thank you.

Online Payment Amt: _____ Confirm. #: _____ Date: _____