

Alaska Bee Registration





Name:		
Mailing Address:		
	(City)	(Zip)
Phone:Email:		
Number of packages received:	Number of hives overwintered:	
Bees purchased from:		
Current location:		
Yes No I would like to receive educ	ational information on beekeeping, natio	onal pest alerts, grant
opportunities, etc.		
Yes No I would like to receive inform	mation on the National Honeybee Pests a	nd Diseases Surv <mark>ey.</mark>
Upon completion of this form mail to:	Alaska Division of Agriculture	-
	ATTN: Bee Registration	1
	1801 S. Margaret Dr.	1
1	Palmer, AK 99645	

If you have any questions or concerns, please contact the registration email address listed above, or call (907) 745 - 7200.

bee.registration@alaska.gov

You can also email this form to: