

Bristol County Beekeepers Association, Inc.

Scholarship Application/Agreement 2023

MISSION STATEMENT

Bristol County Beekeepers Association is a 501(c)3 non-profit organization run entirely by volunteers. We are dedicated to the support of local beekeepers and the advancement of responsible Apiculture through informational meetings, workshops, mentor support, community outreach, and educational programs.

Note: If the applicant is under the age of 18 years a portion of this application is required to be completed by a parent or guardian.

OBJECTIVE

To educate youth in the art of beekeeping and to promote a better understanding of the value of honeybees to our environment and to the food chain.

To provide an opportunity for youth to experience responsibility and enjoyment through beekeeping.

THE AWARD

One-year family membership in the Bristol County Beekeepers Association, Inc.(BrBCA)

One seat in the BrCBA Bee School.

Wooden-ware for a beehive, consisting of:

- 1 screened bottom board with whiteboard (10-frame)
- 1 entrance reducer (10-frame)
- 2 deep boxes (10-frame)
- 2 medium boxes (10-frame)
- 20 deep frames and 20 medium frames with foundation
- 1 inner cover (10-frame)
- 1 telescoping lid (10-frame)
- 1 Hive-top feeder

A package of bees (including a Queen) for the hive.

Beekeeping gear: Jacket, hat, veil, gloves, hive tool, bee brush and bee smoker.

Mentoring by a BrCBA member for one year.

ELIGIBILITY

The Applicant must be a resident of Bristol County Massachusetts.

The applicant must be between the ages of 16 and 21 on January 1, 2022.

The applicant must be currently enrolled in public, private or home school.

All applicants under the age of 18 must have permission and agreement from a parent or guardian.

The applicant and immediate family must not have had any bee colonies prior to the current year.

Applicant must complete and return all paperwork.

BrCBA Scholarship Application packet must be received by the Scholarship Committee between September 1st, 2022 through October 31st, 2022. Applications received after October 31, 2022 will be returned to the sender unopened.

note: The Scholarship recipient must attend and successfully complete BrCBA Bee School. Details will be provided to the recipient upon award of the Scholarship.

Finalist will be selected by the BrCBA Scholarship Committee.

Note: No personal information, other than the scholarship recipient's name, will be released.

*Required Entry

Applicant Name* _____

Date of Birth* _____

Household Address* _____

City* _____

State* _____

Zip Code* _____

Phone* _____

Email Address* _____

Parent or Guardian Name* _____

Parent or Guardian Email Address* _____

Please summarize your involvement in school, community, church and other youth or civic organizations:*

Write a brief paragraph on why you are interested in bees and beekeeping and what you hope to accomplish if you are chosen for this scholarship:*

Parent/Guardian Questionnaire

Do you own or rent your home?*

Own_____ Rent_____

If you selected "rent," do you have permission from your landlord to place a beehive on the property?*

Yes_____ No_____

Do you feel your child can benefit from the program?*

Yes_____ No_____

Do you feel that you can support and encourage your child in this effort?*

Yes_____ NO_____

Does anyone in your immediate family have bees or have you kept bees before?*

Yes_____ No_____

If you answered "Yes" above, when were bees kept?

Bristol County Beekeepers Association, Inc.

A 501 (c)(3) Non-Profit Charitable Organization

Release of Liability and Assumption of Risk Agreement

In consideration of participating in Bristol County Beekeepers Association, Inc. activities, I, _____, the undersigned, acknowledges, agrees and consents to the following: 1. Working with bees involves risks and the possibility of injury, and that these risks always exist, despite any rules, equipment, and personal care used to minimize and mitigate these risks. 2. I voluntarily assume and acknowledge all risks, known and unknown, foreseeable and unforeseeable, even if arising from any act or omission by the Bristol County Beekeepers Association, Inc. and/or any affiliated persons. 3. For myself, my heirs, assigns, personal representatives, and next of kin, I consent to release and in perpetuity hold harmless the Bristol County Beekeepers Association, Inc., its officers, directors, members, instructors, agents, and any and all participants, and if applicable the owners and/or lessors of the premises used to conduct any activity, for any and all injury, disability, death, loss or damage to person or property, cause of action, or any claim that may result from my participation with the Bristol County Beekeepers Association, Inc. 4. This release includes all injury, disability, death, loss or damage to person or property, cause of action, or any claim caused by any act or omission of the Bristol County Beekeepers Association, Inc., its officers, members, instructors and agents. 5. The Bristol County Beekeepers Association, Inc. is under no obligation to provide any financial assistance in the event of any injury, damage, or loss to any person or property. 6. The law of the Commonwealth of Massachusetts governs the terms and conditions of this release, and the courts of the Commonwealth of Massachusetts for the District of Bristol County have jurisdiction over all disputes between the parties. The undersigned hereby agrees that they have carefully read this Release of Liability and Assumption of Risk Agreement and knowingly and voluntarily accept the terms herein. The undersigned acknowledges that they waive substantial legal rights by signing it and have signed it freely and voluntarily as their own act and deed, free of inducement or undue influence.

Signature: _____ Date: _____

Print Name: _____

Signature: _____ Date: _____

Print Name: _____

For members and participants under age 18, please complete the following:

Parent/Guardian Signature: _____ Date: _____

Print Name of Parent/Guardian: _____

Parent/Guardian Telephone: _____

Terms and Conditions

The recipient of this scholarship will receive:

One-year family membership in the Bristol County Beekeepers Association, Inc.(BrCBA)

One seat in the BrCBA Bee School.

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- 1 Hive-top feeder

A package of bees (including a Queen) for the hive.

Beekeeping gear: Jacket, hat, veil, gloves, hive tool, bee brush, and bee smoker.

Mentoring by a BrCBA member for one year.

Successful completion of BrCBA Bee School is required.

The recipient will be expected to attend a minimum of 2 BrCBA monthly club meetings between February 2023 and October 2023.

At each meeting attended the recipient will present a short progress report of the activities to date.

The recipient will keep a written record complete with dates, photos and other pertinent data sufficient to substantiate all progress reports.

A final report will be presented by the recipient at the October 2023 club meeting.

Successful attendance and reporting of progress is required.

A Certificate of Completion and full ownership of the colony and equipment will be awarded at the October 2023 club meeting providing that the scholarship recipient has met all requirements.

Applicant Signature: _____

Parent/Guardian Signature if applicant is under 18)_____

Mail completed scholarship application to:

BrCBA Scholarship

PO Box 286

North Dighton MA, 02764-0286