



Napa County Beekeepers' Association - Membership Form

Full Name: _____ **Date:** _____

Mailing address: (street/PO) _____
(city) _____ (state, zip code) _____

Phone: _____ Email: _____

Years of beekeeping experience: _____

Name of additional household member (one included in membership): _____

Membership Level (check one; see reverse for descriptions):

Worker Bee (\$50/year)

Scout Bee (\$150/year)

Queen Bee (\$300/year) (choose: 10-frame hive box **OR** 8-frame hive box)

Student (Worker Bee membership FREE for students - provide copy of student ID)

Community Sponsorship (\$500+/year) **OR** Pollinator Partner Sponsorship (\$500+/year)

Please provide info below and we will contact you about the details of a partnership with your organization.

Organization name: _____

Contact person and email/phone: _____

Volunteer Interests (check all that apply):

Community Outreach (e.g, Ag Day, etc.)

Helping assemble & paint hive equipment

Education (schools, community)

Assisting with NCBA-sponsored hives

Mentoring (minimum 3 yrs experience req'd)

Assisting with NCBA administrative task

Other Interests? We'd love to hear what you would like to experience or learn about!

Payment options:

Cash (received on _____ by _____)

Check (# _____ received on _____ by _____)

(cash or check may be mailed to NCBA, 2909 Redwood Rd, Napa 94558)

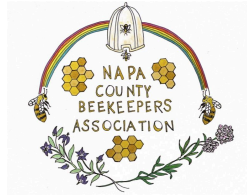
Square (verified on _____ by _____)

(note that Square donations go directly to NCBA via Planet Bluewater Corp, our parent 501(c)(3) organization)

Notes:

I have read and agree to the terms of the NCBA General Liability Release (see last page):

Signature: _____ Date: _____



Napa County Beekeepers' Association - Membership Levels

| | |
|---|--|
| <p>Worker Bee \$50 per year</p> <ul style="list-style-type: none"> ❖ Subscription to monthly NCBA newsletter ❖ 15% discount on purchase of NCBA-logo swag (t-shirts, hive boxes, hats) ❖ Access to NCBA general meetings, guest speaker forums, hands-on educational workshops ❖ Participation in hive dives ❖ Annual Party | <p>Scout Bee \$150 per year</p> <p style="text-align: center;">Worker bee benefits, plus:</p> <ul style="list-style-type: none"> ❖ NCBA-logo t-shirt and sticker, plus 4" native plant ❖ Priority notification and access for limited attendance events ❖ Priority access to bees available (via swarms or splits) ❖ One individualized mentoring visit/consultation (additional possible on mentor availability) |
| <p>Queen Bee \$300 per year</p> <p style="text-align: center;">Worker/Scout bee benefits, plus:</p> <ul style="list-style-type: none"> ❖ NCBA-logo hive box (8 or 10 frame) ❖ Up to 3 individualized mentoring visits/consultations (additional possible depending on mentor availability) | <p>Student membership</p> <ul style="list-style-type: none"> ❖ Worker Bee membership FREE for all students (copy of student ID required) |
| <p>Community Sponsorship \$500+ per year</p> <ul style="list-style-type: none"> ❖ For organizations, wineries, restaurants, businesses wishing to support NCBA and its mission in the Napa Valley ❖ Monthly mention and logo recognition on NCBA website and newsletters ❖ Mention on NCBA social media accounts (Facebook, website, Instagram) | <p>Pollinator Partnership Sponsorship \$500+ per year</p> <ul style="list-style-type: none"> ❖ For organizations, wineries, restaurants, businesses with pollinator-friendly gardens or landscapes (meeting criteria) ❖ Pollinator-friendly and NCBA-sponsorship outdoor sign ❖ Monthly mention and logo recognition on NCBA website and newsletters ❖ Mention on NCBA social media accounts (Facebook, website, Instagram) |

Napa County Beekeepers' Association General Liability Release:

I am a member (or member applicant) of Napa County Beekeepers' Association (NCBA), either as a sole member or together with members of my family as part of a family membership. I myself and, if applicable, each person who is included in my family membership, desire to participate in activities (Activity or Activities) sponsored and/or facilitated by NCBA (alone or in conjunction with others), including on property under control of an NCBA member or on other public or private property not under control of NCBA. In consideration for being permitted to become a NCBA member, enter said properties, and to participate in such Activities, and to induce NCBA and the Facilitators (defined below) to permit the undersigned (and other members of my family membership) to enter the properties and to participate in any of the Activities, I hereby voluntarily enter into and agree to this liability release (Release) on behalf of myself and each member of my family membership.

I specifically acknowledge:

(1) an Activity may occur on private property owned, leased, or controlled by persons helping to present or facilitate the Activity (each a Facilitator);

(2) Activities may involve social or educational activities, group participation, may or may not involve one or more leaders (each also a Facilitator), a leader may or may not be compensated, the Activity may or may not involve a fee or NCBA membership requirement, and individuals participating in the Activity may run the gamut from beginner to expert in each aspect of the Activity;

(3) the Activity could involve potentially dangerous risks, including bees (whose stings can cause severe allergic reactions in certain persons, and even lead to death), hands on activities, difficult terrain, dangerous tools, ladders, transportation, chemicals, and other environmental and manmade hazards the extent and nature of which it is not feasible for NCBA to fully predict in advance, but all of which are intended to be covered by this Release. As a condition of my membership in NCBA, and a condition of members of my family being included in my NCBA family membership, and as a condition of my and my family's participation in any Activity,

I acknowledge and agree that:

1. For myself and on behalf of my heirs, assigns, personal representatives, and successors, and (if applicable) on behalf of each member of my family who is part of my family membership in NCBA, I hereby release and indemnify, and agree to hold harmless and defend, NCBA, its members, officers, officials, agents, and/or employees, all Facilitators, and other Activity participants, sponsors, and advertisers (Releases), from and against any and all claims, demands, damages, losses, and liabilities arising out of or related to any injury, disability, or death, and property damage or loss, that I or any member of my family, or any person I invite to participate in the Activity, may suffer as a result of my or their participation in the Activity, or that I or they may cause to any other person or property, whether arising from the negligence of the Releases (either solely or jointly with others) or otherwise, to the fullest extent permitted by law.

2. I knowingly and freely assume all risks of the Activity, both known and unknown, including those arising from the negligence of the Releases and others, and I assume full responsibility and risk for my, and each member of my family's, participation in the Activity. I agree to comply with terms and conditions of participation in the Activity.

3. This Release is continuing and shall apply to all Activities in which I and any member of my family participate as relates to NCBA, regardless of the time passed between the date of this Release and the Activity date.