

# Dover and District Beekeepers' Association

Member of the B.B.K.A. and B.D.I.

**Hon. Secretary:** Mrs Maggie Harrowell, 4 Harton Cottages, Ashley, Dover, Kent CT15 5HS

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**Hon. Treasurer:** Julie Scott, Wheelwrights, The Street, Swingfield, Dover, CT15 7HA

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website : [www.ddbka.co.uk](http://www.ddbka.co.uk)

**Aims:** The aims of the Association are to promote good practical beekeeping by giving advice to beginners and all beekeepers throughout the season; to obtain equipment from reputable beekeeping suppliers at good sound prices; to keep in touch with all members by means of a monthly newsletter, monthly meetings at apiaries during the summer season and at Alkham Village Hall or other similar venue during the winter period.

## **SUBSCRIPTION FORM 2025 PLEASE NOTE NEW ACCOUNT DETAILS, BELOW**

**Name:**

**Address and postcode:**

**Phone no(s):**

**email address:**

**Number and type(s) of hives** (please allow for any expected increase):

**Do you suffer from any bee-related allergies?** Yes/No [please specify if 'yes' & continue overleaf if needed]

**Registered on BeeBase?** Yes/No Please register with BeeBase - it contains free, up to date local information for all beekeepers <https://www.nationalbeeunit.com/register>

**FEES for one year** (to 30<sup>th</sup> November 2025) *NB. Pls use on-line renewal & pay if poss.*

**Registered Member:** (includes £21 BBKA m'ship and Bee Disease Insurance cover)

1-3 hives    £30.00

4-5            £31.20

6-10          £34.70

11-15        £37.75

16-20        £39.50

21-25        £41.10

26-30        £43.60

31-35        £46.10

36-39        £48.10

*Please circle the fee being paid and your total hives - allow for any increase.*

**Associate Member:** £10 (excl. BDI + BBKA m'ship - 1st year under-18 FREE)

**How to pay (in order of preference - please use bank transfer if possible):**

(i) Bank Transfer to: **Account Name "Dover and District Beekeepers Association";**

**Account No. 30067863; Sort Code 30-99 -50. PLEASE NOTE NEW ACCOUNT**

**DETAILS!!** Please ensure the member's name appears as payment reference or in payer's acct name)

OR (if bank transfer is not possible)

(ii) By cheque, payable to **Account Name "Dover and District Beekeepers Association";**

**PLEASE NOTE NEW ACCOUNT NAME !!** OR

(iii) In cash, in person to Hon Secretary or Hon Treasurer only.

If using (i) please email or give or post your completed form to Hon Sec (see above).

If using (ii) or (iii), and paying at a meeting, please enclose cheque or cash with this completed subs form, in a sealed envelope with the member's full name on it and give to Hon Sec or Hon Treasurer (see above).

If paying cheque (ii) by post, please enclose completed form to Hon Sec (see above).

**Please take care to write account name as above on bank transfer and cheque.**

## **Dover and District Beekeepers' Association Volunteering:**

We encourage members to get involved and need help in the following areas.

Please tick any that you can help with and return with the rest of the form:

- ☐ Apiary Inspections - working with the team - we need several people for the rota
- ☐ Honey Extracting, Processing and Bottling
- ☐ Refreshments at Monthly Meetings (preparing and/or serving)
- ☐ Grounds Maintenance (e.g. grass cutting)
- ☐ Library - manning it at meetings
- ☐ Gate Duty at Monthly Meetings (making sure it's open in advance and closed after)
- ☐ Other (please specify if you think you can help in some other area) .....

### **Use of your data:**

By paying your membership subscription and joining the Dover & District Bee Keepers Association (DDBKA), you accept that we may hold and process (use) the data you have given us, either on this form or by any other means (e.g. email or on-line renewal) to manage the affairs of the association.

**ASIAN HORNET ACTION TEAM:** The Association's AHAT Coordinator would like permission to contact members to pass on information about Asian Hornet sightings and trapping activities. Please indicate below if you DO NOT WANT your contact details to be passed on to the AHAT coordinator:

- ☐ I DO NOT want my email address to be used for AHAT
- ☐ I DO NOT want my contact phone number to be used for AHAT

You accept that we will pass your data to the BBKA (to enable you to be a member of that organization and receive its publications) and to BDI (to enable them to provide you with disease insurance). We will not pass your data to any other organization. If you have any queries about how we hold and process your data, please contact the Hon Secretary (Maggie) .

### **Agreement to Terms and Conditions of Membership:**

By joining the DDBKA and becoming a member using this form or via the on-line membership renewal or in any other way, you agree to the terms and conditions of membership of the Association and to observe the rules and safety guidance of the Association's apiary (or apiaries) when attending meetings.

Specifically you accept that working with bees in the apiary carries risk of personal injury, including from bee stings, from lighting and using a smoker and from lifting heavy bee boxes etc, and you agree to take full responsibility for your own health and safety when in the Association's apiary including the wearing of appropriate safety clothing (bee suit, gloves, boots, etc).

If you have a sensitivity to bee stings, you must make this known to DDBKA officers whenever you work with bees at the Association's apiary and must carry and be able to use an EpiPen if advised by your doctor to do so.

A Risk Assessment is available at the apiary for your information. You agree to comply with its recommended risk mitigation measures.