Local Washington State Beekeeping Associations can apply for a grant for up to $2000 to be used to make a greater positive impact in their local area.

**Purpose:** The Local Grant is to give local Washington State Beekeeper Associations (WSBA) the opportunity to make a larger positive impact in their geographical area.

**Scope:** The Local Grant is specifically to be used to promote Honey Bee activities by:

1. Hosting workshops or classes to attract and support new beekeepers.
2. Purchasing equipment that will be shared with other local beekeepers as a resource.
3. Build an association honey processing house, and purchase extracting equipment.
4. Start and maintain a local queen breeding group that supports the local association with queens, nucs, local package bees, etc.
5. Build resources to engage the public on the benefits of honey bees.
6. Research new methods of beekeeping that will benefit other beekeeping associations.
7. Send members to educational opportunities to share with the community.

**Grant Guidelines:**

Grant arrangements are flexible depending on funding ability of potential Grantee. Grants are funded from WSBA membership dues. Grant may specifically be used for construction or purchase of materials for fair booths, beekeeping equipment, educational materials, teaching aids and honey bees.

**The details:**

1. The WSBA will grant up to $2,000 in supplies and equipment.
2. Applicants must be a Local Washington State Beekeeping Association applying for a Grant and have WSBA Membership dues current.
3. Grantees will be required to submit a detailed proposal that includes all proposed expenses to be eligible for grant selection.
4. The grant requires matching funds from the local association.
5. Local Beekeeper Association Grant applications must be received no later than September 1 of each year. Applications received after September 1 will not be accepted.
6. The term of the Grant shall be for one year up to a maximum of three years starting January 1.
7. Grantees will receive up to $2,000 for equipment and supplies. The range of money granted is typically between $500 up to $2,000.
8. The service area of the WSBA Local Beekeeper Association Grant includes all Washington State Counties and is restricted to local beekeeping associations that are current with State dues.

Applicants must include in the application the following:
1. Association name, address, contact information that will include association officers, phone numbers, and email addresses.
2. Length of time proposed grant will run.
3. Title and Purpose of Grant.
4. Scope of Grant including details of the proposed program and the number of persons the grant will expose to beekeeping principles and practices.
5. Detailed list of proposed expenses including paid labor, materials and equipment.
6. How the Grantee will match the funds requested.

At the discretion of the Scholarship Committee, applications not filled out completely and legibly will not be accepted.

**Grantees are expected to give an oral presentation at the annual Washington State conference (typically held in October each year) of the success and details of the granted program.**

Grantees will submit detailed receipts for all expenses and will be reimbursed for expenses detailed under the grant application. Send requests for reimbursement to the WSBA Treasurer.

Please return application or address questions to:

Paul Lundy
WSBA
7346 NE Crawford DR
Kingston, WA 98346
425-527-4250 (office)
Grants@wasba.org
Applicant information:

Name ____________________________________________
(last name) (first name) (middle name)

Email ________________________________ Phone # __________________

Home Address __________________________________________
(house no. & street)

City __________________________ State __________ Zip Code __________

Local Association Name: ________________________________

President: __________________________ phone: __________________

Vice President: __________________________ phone __________________

Secretary: __________________________ phone __________________

Treasurer: __________________________ phone __________________

Grant information:

Grant Name: ________________________________

Purpose: ______________________________________
____________________________________
____________________________________
____________________________________

Scope of work: ________________________________
____________________________________
____________________________________
____________________________________
Acknowledgment/Assumption of Risk/Waiver. The undersigned hereby acknowledges that there are inherent risks associated with the act of Beekeeping. Allergic reactions associated with bee stings and/or bee products may be severe. By their signature(s) below, the undersigned hereby assumes the risks, dangers, or hazards associated with Beekeeping.

By affixing my signature hereto, I hereby affirm that I have fully read, and understand, all of the provisions in this Grant Application. I am authorized to commit funds on behalf of the Local Beekeeping Association listed on this Grant Application.

Dated: ____________________________ Signature - President of Local Beekeeping Association

_______________________________( Print Name)

Dated: ____________________________ Signature - Applicant name (if different from above)

_______________________________( Print Name)

Revision 14SEP2013