THE BRITISH BEE CHARITY

APIARY OPEN DAY

PARTICIPANT DISCLAIMER AND SAFETY DECLARATION

Please read this document carefully before entering the apiary.

The British Bee Charity is committed to providing a safe and enjoyable experience for all visitors. However, visiting a working apiary involves inherent risks, and all participants must understand and accept the safety requirements outlined below.

1. Safety Instructions

All participants must listen carefully to the safety briefing and follow the instructions given by The British Bee Charity's apiary team at all times.

If you do not understand an instruction or require assistance, please ask a member of the team before proceeding. The Charity reserves the right to suspend an activity or remove a participant from the apiary if safety instructions are not followed.

2. Protective Clothing and Equipment

Protective clothing and equipment provided by The British Bee Charity must be worn correctly and at all times while inside the apiary, in accordance with the instructions given.

If you need to adjust or remove any protective equipment, you must inform a member of the apiary team and leave the apiary safely before doing so.

All borrowed equipment must remain on site and be returned to the designated area after use. Participants may be held responsible for damage resulting from misuse or negligence, subject to applicable law.

3. Alcohol and Drugs

Anyone who is under the influence of alcohol, illegal drugs or any substance that could impair their ability to participate safely will not be permitted to take part in the activities.

4. Risks Associated with Bees

Bees are living insects, and their behaviour cannot be entirely predicted or controlled. Although reasonable precautions are taken to minimise risks, these may include:

- Bee stings and allergic reactions, which can be serious or life-threatening.
- Accidental contact with bees or beekeeping equipment.
- Slips, trips, falls and other hazards associated with an outdoor working environment.

By taking part, you acknowledge that these risks exist. You must follow all safety instructions and tell a member of the apiary team immediately if you feel unwell, are stung or wish to leave the activity.

Hands-on participation is entirely optional. Visitors may observe the bees without handling them.

5. Medical Conditions and Allergies

Before participating, you must inform The British Bee Charity of any relevant medical condition, injury or known allergy that could affect your safety during the visit. This includes any known allergy to bee stings and any condition that may require assistance in an emergency.

If you have a known severe allergy to bee stings, please contact the Charity before booking to discuss whether the visit is suitable for you.

6. Children and Young People

A parent or legal guardian must complete and sign this declaration on behalf of any participant under 18 years of age.

Children must remain under the supervision of their responsible adult throughout the visit and must follow all instructions given by the apiary team.

7. Responsibility and Liability

All participants must take reasonable care for their own safety and the safety of others and comply with the safety requirements of The British Bee Charity.

The Charity will take reasonable steps to manage the risks associated with the visit. Nothing in this declaration excludes or restricts any liability that cannot legally be excluded or restricted under UK law.

PARTICIPANT DECLARATION

I confirm that I have read and understood this declaration, have been made aware of the risks associated with visiting a working apiary, and agree to follow the safety instructions provided by The British Bee Charity.

I confirm that I have disclosed any relevant medical conditions, injuries or known allergies and understand that I may choose not to participate in any hands-on activity.

Where I am signing on behalf of a child under 18, I confirm that I am their parent or legal guardian and consent to their participation, subject to the safety requirements explained above.

Participant's full name: _____

Date of visit: _____

Signature: _____

FOR PARTICIPANTS UNDER 18

Child's full name: _____

Parent/Guardian's full name: _____

Parent/Guardian's signature: _____

Emergency contact telephone number: _____

MEDICAL CONDITIONS OR KNOWN ALLERGIES

Please provide details of any relevant medical conditions, injuries or known allergies that the apiary team should be aware of:

The information provided will be handled appropriately and used where necessary to help safeguard participants during the visit.