

Volunteer Form

Due to the nature of Willow Creek Ranch Therapeutic Riding Center programs, the following information is needed to ensure a safe and respectful environment, recognize PATH International responsibilities and promote insurability.

Please Print Clearly

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Nickname: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Phone(s):cell: \_\_\_\_\_  Texting accepted. Alternative phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Employer and/or School: \_\_\_\_\_

Please check all areas of interest:

- Arena Assistant  Fundraising  Grounds Keeper  Marketing/Advertising
 Chores/Feeding  General Office  Horse Handling  Side walking with a student
 Events Coordination  Grant Writing  Horse Prep/Barn Work  Volunteer Recruiting/Scheduling

How did you hear about Willow Creek Ranch (WCR)? \_\_\_\_\_

Do you have a friend or family member who would be interested in receiving volunteer information from WCR?

Name \_\_\_\_\_ Phone/Email: \_\_\_\_\_

Please indicate days/times you are available to volunteer: \_\_\_\_\_

Horse experience or working with special needs individuals is not a requirement for volunteering. You may use back of form for additional information.

Please describe your experience working with individuals who have special needs: \_\_\_\_\_

How many years of experience do you have working with horses? \_\_\_\_\_ Please describe: \_\_\_\_\_

Health

If you are volunteering for the lesson program (arena assistant/horse handling/side walking), can you walk for 45 minutes and jog short distances? \_\_\_\_\_ yes \_\_\_\_\_ no Are you able to raise your arms above shoulder height? \_\_\_\_\_ yes \_\_\_\_\_ no

Are you CPR/First Aid certified? \_\_\_\_\_ yes \_\_\_\_\_ no If yes, expiration date \_\_\_\_\_  adult  child

Demands of working in an equine-assisted program include physical and emotional considerations. Please list any limitations (e.g. allergies, fitness, respiratory, bone/joint function, lifestyle changes, animal apprehensions) that may affect your ability to work in a ranch environment. This is not to exclude anyone that wishes to volunteer, but allows us to accommodate needs, if possible. A tetanus shot is recommended, but not required.

Medications for emergency use (e.g. epi-pen, inhaler): \_\_\_\_\_

(Office: Forms Complete \_\_\_\_\_; Roster \_\_\_\_\_; Email group \_\_\_\_\_; Orientation \_\_\_\_\_ Emer. Dismt. \_\_\_\_\_)