Lily Creek Farms

Therapeutic Riding Center

6031 Carpenter Rd

Defiance, OH 43512

(419) 785-6763

VOLUNTEER REGISTRATION APPLICATION

# VOLUNTEER INFORMATION

First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_\_\_\_\_\_

Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Ext \_\_\_\_\_\_\_\_\_ OK to call at work? \_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

May we add you to our Facebook Volunteer private group? \_\_\_\_\_\_\_\_\_\_\_

# OTHER INFORMATION

## How did you hear about Lily Creek Farms TRC?

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Briefly explain your experience with people with disabilities:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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## Briefly explain your experience with horses:

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Have you ever been convicted of a criminal offense? (We do require Background Checks, I will email the link to purchase one.)

If yes, please explain:

## Indicate the reason you are seeking a volunteer position (circle all that apply):

Personal fulfillment School requirement Future Employment

**Most volunteers help 1-3 hours per week.**

**At the end of your training, you will be asked to commit to a time (at least once per week).**

When are you available?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Volunteer Opportunities at Lily Creek Farms TRC

Please check any opportunity that you may be interested in assisting with or learning more aout.

\_\_\_\_\_ **Riding Lesson Volunteer** – Horse handlers lead the horse and side walkers assist the student with physical or verbal assistance during the lesson. Work with instructor and students in non-mounted activities where students learn horse care (parts of horse, grooming, stall cleaning, etc.) and do arts and crafts.

\_\_\_\_\_ **Horse Buddy** – Horse buddies are responsible for feeding, grooming, and all care of the horses. This position is extremely vital to the success of our programs.

\_\_\_\_\_ **Maintenance** – Help keep facility running smoothly and looking good by helping with cleaning, weeding, mowing, light carpentry, and fix-it type jobs

\_\_\_\_\_ **Office Assistance** – Make copies, assemble mailings, and assist with other projects as needed.

\_\_\_\_\_ **Special Event Volunteer** – help to organize, and do specific event related projects.

Lily Creek Farms TRC has at least three major fundraiser each year. Volunteers are needed to plan and organize prior to the event and the day of the event. We also have many smaller fundraisers each year.   
We do ask that you volunteer for at least 2 of our major fundraisers and one smaller fundraiser per year.

# GENERAL HEALTH AND CONSENT

Please list any health conditions, issues, or medications taken:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please note any allergies (bees, asthma, medications, latex) and if they are LIFE THREATENING.

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# EMERGENCY CONTACTS

First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Day Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# AUTHORIZATION FOR EMERGENCY MEDICAL TREATMENT

The Undersigned hereby grants to a staff member of Lily Creek Farms Therapeutic Riding Center (TRC) the authority to make health care decisions with respect to the volunteer if the undersigned is unavailable to make such decisions. The term “health care” and “health care decisions” as used in this form shall have the meanings set forth in the Ohio revised Code Sections 1337.11 through 1377.11.

**Volunteer Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Parent/Guardian (if under 18 years old)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

# RELEASE AND HOLD HARMLESS AGREEMENT

The Undersigned acknowledged that Lily Creek Farms Therapeutic Riding Center (TRC) has fully explained to me the risk involved with horseback riding, horse-related activities and/or working around horses. These risks include but are not limited to bodily injury, permanent disability, physical harm to rider, horse and spectator, and even death. I further understand that the horse is a prey animal and regardless of its calm nature and training, the horse will revert to its natural instinct to fight or flee when frightened. These actions may include but are not limited to changing speed or direction at will, shifting its weight, bucking, rearing, kicking, biting, or running from danger.

I further understand that Lily Creek Farms TRC and its representatives are not responsible for acts, occurrences, or elements of nature which include but are not limited to thunder, lightning, rain, snow, wind, and irregular footing which is subject to constant change in condition according to the weather, temperature, usage, and natural and man-made changes in landscape.

Therefore, in consideration of the privilege or riding and/or working with and around horses and all other animals owned or leased by Lily Creek Farms TRC located at 6031 Carpenter Rd, Defiance, Ohio, the Undersigned does hereby agree to hold harmless and indemnify Lily Creek Farms TRC, its employees, volunteers, board, students, and any and all real property owners and further release them from any liability or responsibility for accident, damage, injury, or illness to the Undersigned, or to any horse owned by the Undersigned, or to any family member or spectator accompanying the Undersigned on the premises.

I further agree that lily Creek Farms TRC will make an employee/volunteer manual available to me if requested. I have also read and reviewed a copy of the Equine Liability Law which states:

Equine (Horse) Activity Sponsor, Equine And/Or Property Owner Is Not Liable For Any Damages Suffered During An Equine Activity On These Premises. A Horse Is A Large Animal And May Be Unpredictable and Dangerous At Times. Extreme Caution Should be Taken In Their Presence. Participants Assume The Inherent Risk Of Equine Activities.

**Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Parent/Guardian (if under 18 years old)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

# PLEASE READ BEFORE SIGNING:

## I UNDERSTAND:

* and have signed the attached Release and Hold Harmless Agreement;
* and grant Lily Creek Farms TRC permission to use my likeness, voice and/or words in television, radio, film, social media or in any form to promote activities of Lily Creek Farms TRC;
* that current Tetanus and Hepatitis B vaccinations are recommended when working around horses and students;
* **that, in order to volunteer at Lily Creek Farms TRC, I am committing to a minimum of one hour per week, or will participate in substituting when needed, and will give a minimum of two week’s notice when I am no longer able to volunteer.**

I affirm that I have read the above and that the information I have given is true and complete. I understand that if at any time the information provided is found to be knowingly falsified or inappropriate, I will no longer be allowed to volunteer at Lily Creek Farms TRC.

**Volunteer Signature**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Parent/Guardian (if under 18 years old)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

