

Runnin WJ Ranch

Therapeutic Riding Center

Volunteer Information Form 2013-2014

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Best Contact Phone: _____ Alternate Phone: _____

Email Address: (please print clearly) _____

Date of Birth: _____ Age: _____ Texting: (Yes) _____ (No) _____

School/College (if attending): _____ Height: _____ T-shirt size: _____

Church (if attending): _____

U S Military (past or present): (Yes) _____ (No) _____

Day(s) and shift(s) you will be available to volunteer : (circle all that apply)

Monday	Tuesday	Wednesday	Thursday	Friday
Morning	Morning	Morning	Morning	Morning
Afternoon	Afternoon	Afternoon	Afternoon	Afternoon
Evening	Evening		Evening	

I would like to volunteer as a: (Check) Horse Leader _____ (good horse experience **required**)
Side walker _____ (little or no horse experience)
Either Position _____ (qualify for both)
Volunteer Caller _____ (must have fax or email & can be performed from your home)

Substitute List: If you cannot commit to at least one hour each week, then you may be called to fill in for a volunteer only in the event that they are unable to make their time.

Sub List: (Yes) _____ (No) _____

How did you hear about us? Website _____ Facebook _____ Twitter _____ Radio _____
Magazine _____ Word of Mouth _____ Other _____

Please give a brief statement as to why you would like to volunteer with Runnin WJ Ranch:

Liability Statement

No person can be accepted for volunteer service until the participant has completed this form. If the participant is less than eighteen (18) years of age the parent or guardian must complete this form. Services will be under trained supervision and although every effort will be made to avoid any accident, **NO LIABILITY** can be accepted by any of the organizations concerned, including Runnin' WJ Ranch.

YES, I would like to participate or have my son/daughter participate as a volunteer. I understand that **NO LIABILITY** can be accepted by any organization concerned with this service, including Runnin' WJ Ranch in the event of any accident, which might occur.

Participant Signature: _____ **Date:** _____

Parent/Guardian Signature: _____ **Date:** _____
(If participant is under 18yrs of age)

WARNING: UNDER TEXAS LAW (CHAPTER 87, CIVIL PRACTICE AND REMEDIES CODE), A FARM ANIMAL PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN FARM ANIMAL ACTIVITIES RESULTING FROM THE INHERENT RISKS OF FARM ANIMAL ACTIVITIES.

Emergency Medical Information

Name of Participant: _____

Preferred Physician: _____

Physician Phone: _____

Preferred Medical Facility: _____

Insurance Company: _____

Policy / Group Number: _____

Phone: _____

**Describe any medical conditions requiring special precautions or treatment:
(Example: Diabetic, Severe Allergies, Asthma)**

Emergency Contact Information

In case of emergency notify: _____

Relationship to participant: _____

Phone: (____) _____

Background Information

Have you ever been charged with or convicted of a crime? Yes ____ No ____

If yes, please explain: _____

Are you currently on probation and/or performing community service: Yes ____ No ____

Current Driver's License Number: _____ State: _____

I currently do not have a Driver's License: (check) ____

I, (name) _____, authorize Runnin WJ Ranch to receive information from any law enforcement agency, including the police department and sheriff's department, of this or any other state or federal government, to the extent, permitted by state and federal law, pertaining to any convictions I may have had for violations of state or federal criminal laws, including but not limited to convictions for crimes committed upon children.

I understand that such access is for the purpose of considering my application as an employee/volunteer, and that I expressly **DO NOT** authorize the Runnin WJ Ranch, it's directors, officers, employees, or other volunteers to share this information in any way to other individual, group, agency, organization, or corporation.

Participant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____
(If participant is under 18yrs of age)

Confidentiality Agreement

I agree to respect and observe privacy and confidentiality of the participants, volunteers and donors of the Runnin WJ Ranch Therapeutic Riding Center and not discuss or disclose any sensitive information about any person or their family.

Participant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____
(If participant is under 18yrs of age)

Social Marketing Policy

In the area of social media (print, broadcasting, digital and online), the following guidelines apply in the use of social media for our volunteers:

1. Should you decide to create a personal blogs or website, be sure to provide a clear disclaimer that the views expressed in the blogs are the author's alone and do not represent the views of Runnin WJ Ranch.
2. All information published on any volunteer blogs should comply with Runnin WJ Ranch confidentiality policy. This also applies to comments posted on other social networking sites, blogs and forums.
3. Your online presence can reflect on Runnin WJ Ranch. Be aware that your comments, posts or actions captured via digital or film images can affect the image of Runnin WJ Ranch.
4. Do not use any Runnin WJ Ranch logos or trademarks without written consent.

I hereby confirm that I have read and understand the Social Marketing Policy of Runnin WJ Ranch.

Participant Signature: _____ **Date:** _____

Parent/Guardian Signature: _____ **Date:** _____
(If participant is under 18yrs of age)

Photo Release

For valuable consideration given and which is hereby acknowledged, the undersigned hereby grants to Runnin WJ Ranch permission to take or have taken still and moving photographs and films, including television pictures, and consents and authorizes Runnin WJ Ranch and its work, to use and reproduce the photographs, films or pictures, and to circulate and publicize the same by all means, including, without limiting the generality of the foregoing, newspapers, television media, brochures, pamphlets, instructional materials, books, and clinical materials.

With respect to the foregoing matters, no inducements or promises have been made to secure this signature to release other than the intention of Runnin WJ Ranch to use or cause to be used such photographs, films, and pictures for the primary purpose of promoting Runnin WJ Ranch to its work.

I Do give Consent: _____ **Date:** _____

I Do Not give Consent: _____ **Date:** _____
(Participant Signature or Parent Signature if participant is under 18yrs of age)