

VOLUNTEER INFORMATION

Name: _____

Date of Birth: _____ Age: _____ (you must be 16 or older)

Home Address: _____
Street City State Zip

Home Phone: _____ Cell Phone: _____

Email: _____

Employer: _____ Work Phone: _____

If you are a student, name of your school: _____ Grade: _____

Do you have experience with horses? YES NO

If yes, please describe your horse experience: _____

Do you have experience with individuals with special needs or disabilities? YES NO

If yes, please describe your experience: _____

Do you drive? YES NO

Are you available on short notice in an emergency? YES NO

How did you learn about QUEST? _____

Please check any special volunteering interests:

___ feeding horses ___ leading a horse ___ fundraising
___ grooming horses ___ sidewalking for a rider ___ grounds maintenance
___ exercising horses ___ facility repair ___ other
___ stable care ___ photography/video

Please indicate the days, times and/or number of hours that you would consider volunteering:

MONDAY _____

TUESDAY _____

WEDNESDAY _____

THURSDAY _____

FRIDAY _____

SATURDAY _____

SUNDAY _____

VOLUNTEER LIABILITY RELEASE FORM

PLEASE READ CAREFULLY! This form must be read and signed by the Volunteer or by a parent or legal guardian if the Volunteer is a minor (under 18 years of age). Let it be understood that this form is a release of liability contract between QUEST and the Volunteer.

EQUINE LIABILITY ACT WARNING

Under the Equine Liability Act, each participant who engages in an equine activity expressly assumes the risks of engaging in and legal responsibility of injury, loss, or damage to person or property resulting from the risk of equine activities.

Upon acceptance of horse and equipment, I, _____, acknowledge that I assume full responsibility for my own safety. I further understand that I ride and participate in activities at QUEST at my own risk. I agree to hold QUEST, its officers, volunteers, employees, board members, horse owner (s) if other than QUEST, harmless from every and all claims which might arise from any injury which occurs from use of any horse and/or equipment, in favor of myself, my heirs, representatives or dependents. I understand that QUEST does NOT represent or warrant the quality or character of any horse furnished, and that QUEST, the stable, its agents and employees are released from ordinary acts of negligence. I understand that horseback riding and assisting with others who ride horses, will expose me to certain risks. This release has provided me with notice of the risk of engaging in any and all equine activities. I understand (1) the propensity of a horse to behave in dangerous ways that may result in injury to me: (2) the inability to predict a horse's reaction to sound, movements, objects, persons, or animals: and (3) the hazards of surface or subsurface conditions. I understand that I MUST wear protective headgear at all times while riding, mounting or dismounting. I understand that the wearing of such headgear may prevent or reduce the severity of some head injuries and may even prevent death due to a fall or other occurrence. This release shall remain valid until expressly revoked by me, or if a minor, the parent or legal guardian.

Signature: _____ Date: _____
(signed by parent/guardian of participant if under age 18)

VOLUNTEER CONSENT/NON-CONSENT FOR USE OF STILL & VIDEO PHOTOGRAPHY

Please Check One: _____ I consent _____ I do NOT consent to the use and/or reproduction by QUEST of any and all photographs and any other audio-visual materials taken of me for promotional material, educational activities, exhibitions or for any other use for the benefit of the program

Signature: _____ Date: _____
(Signed by Parent/Guardian of participant if under 18 years of age.)

PLEDGE OF CONFIDENTIALITY

I pledge to respect the privacy of our participants by not discussing names, disabilities, or sharing any other personal information about persons or horses in our program outside QUEST.

Signature: _____ Date: _____
(Signed by parent/guardian of participant if under 18 years of age)