



# Sebastian Riding Associates Volunteer Registration

(Print out, complete and schedule an orientation with Cyndi, [sebastianvol@verizon.net](mailto:sebastianvol@verizon.net))

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Address: \_\_\_\_\_ Town: \_\_\_\_\_ Zip: \_\_\_\_\_

Best way to reach you: (Home, Work, Cell, Text?) Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

### I am interested in:

- Helping with Stable & Pastures
- Horse Care
- Facility Repairs & Property Maintenance
- Public Relations/Newsletter
- Fundraising Projects & Benefit Events
- Volunteer Coordinating & Training
- Administrative/Office Help
- Side-walking in lessons with student
- Leading Horse in lessons with student
- Assisting Instructors with student groom & tack for lessons
- Assisting students in Horse Shows & Camps

*Sebastian is open 7 days a week 7am-7pm, year round.*

*No matter what your time schedule or ability, Sebastian's has a volunteer position for you.*

*Can you assist on a regular basis a few hours weekly?  or every other week?*

*Are your hours for a special project? Explain \_\_\_\_\_ How many hours? \_\_\_\_\_*

### Which days and during which times you are able to help?

(Example: Monday: Morning: 6am-8:30am or 9am-11am and Tuesday: Midday:12:30 – 3pm Friday Evenings 5pm-7pm)

- Monday:     Morning \_\_\_\_\_     Midday \_\_\_\_\_     Evening \_\_\_\_\_
- Tuesday:     Morning \_\_\_\_\_     Midday \_\_\_\_\_     Evening \_\_\_\_\_
- Wednesday:     Morning \_\_\_\_\_     Midday \_\_\_\_\_     Evening \_\_\_\_\_
- Thursday:     Morning \_\_\_\_\_     Midday \_\_\_\_\_     Evening \_\_\_\_\_
- Friday:     Morning \_\_\_\_\_     Midday \_\_\_\_\_     Evening \_\_\_\_\_
- Saturday:     Morning \_\_\_\_\_     Midday \_\_\_\_\_     Evening \_\_\_\_\_
- Sunday:     Morning \_\_\_\_\_     Midday \_\_\_\_\_     Evening \_\_\_\_\_

- All Seasons     Winter     Spring     Summer     Summer Camps only     Fall

Describe your experience with horses? \_\_\_\_\_

Describe your experience with people with disabilities? \_\_\_\_\_



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## Child Abuse & Criminal Background Clearances (Required for adult volunteers 18yrs old+)

I understand that both a Child Abuse Clearance & a Criminal Background Clearance are required by the state prior to Volunteering to work with children. The state requires Clearances be renewed every 57months.

\_\_\_\_\_  
Initial & Date

I have attached my recent:  Child Abuse Clearance  Criminal Background Clearance

## **Photography Agreement:**

I  DO  DO NOT consent to and authorize the use and reproduction by Sebastian Riding Associates of any and all photos/audiovisual materials taken of me for promotional material, educational activities and exhibit displays.

\_\_\_\_\_  
Initial & Date

## Confidentiality Agreement

I understand that all information (written and verbal) about participants at Sebastian Riding Associates is confidential and will not be shared with anyone.

\_\_\_\_\_  
Initial & Date

## Emergency Contact & Treatment Release

Name: \_\_\_\_\_ I

Daytime: \_\_\_\_\_ Evening: \_\_\_\_\_ Cell: \_\_\_\_\_

In the event emergency medical aid/treatment is required, I authorize Sebastian Riding Associates to secure and retain medical treatment and transportation.

## **Describe any allergies or any medical condition we should be aware?**

(Please explain specifically). \_\_\_\_\_

My signature below certifies my understanding of an agreement with the above statements and releases. I would like to participate in Sebastian's volunteer program. I understand the risks involved and release and hold harmless employees, contractors, board members, volunteers of Sebastian Riding Associates and Evansburg State Park for claims and injuries.

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

(Parent/Guardian if under 18)