



2018 Volunteer Application

Therapeutic Recreation for Special Needs Children

67 Tulips Road, Hoquiam, WA 98550
 Mailing: PO Box 971, Aberdeen, WA 98520
 (360) 593-1117

FOR OFFICE USE ONLY
 DP _____
 BGC DATE _____

The Horse Prayer requires all adult volunteers (18+ yrs) to complete a background check every 3 years.
 Please visit our website for information on how to complete the background check: www.theHorsePrayer.com

(PLEASE TYPE or PRINT CLEARLY)

Legal Name: _____ I prefer to be called: _____

Birthdate: _____ Gender: M F If Student, School You Attend: _____

Street Address, _____ City _____ State _____ Zip _____
 Cell Phone: _____ Work: _____ Email: _____

The best way to contact me is: Phone Call Text Email

Please list any relevant certifications/skills (PSIA, PATH, CPR, WFR, ASL, etc.) _____

EMERGENCY INFORMATION – REQUIRED

Food/Drug Allergies: _____

Existing Conditions/Meds/Physical Limitations: _____

Emergency Contact Name _____ Relationship _____ Phone: _____

I am available to help with office duties during these times:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM							
PM							

THE HORSE PRAYER at Patrick Farms, LLC.

- I agree to respect The Horse Prayer participants', staff, and volunteers' rights with regard to privacy of information and to keep "professional" confidentiality in all my statements both within and outside of the organization.
- I understand that The Horse Prayer staff members have the authority to exclude participants or volunteers from the program for behavior they deem to be unsafe. Use of alcohol or illegal drugs is unsafe behavior.
- I give my consent to The Horse Prayer and its medical representative to obtain medical care from any licensed physician, hospital, or clinic, for any injury that could arise from participation in The Horse Prayer activities.

X _____
 Signature of Volunteer/Guardian

 Date

Thank you for completing the following questions and for your interest in being a Horse Prayer volunteer.
 The gift of your time allows us to offer these programs.

VOLUNTEER ASSUMPTION OF RISK

PLEASE READ THIS ENTIRE DOCUMENT CAREFULLY BEFORE SIGNING. All volunteers must sign this document. For volunteers under 18 yrs. of age, one or both parent(s) or legal guardian(s) must also sign. Throughout this document, volunteers under 18 yrs. of age will be referred to sometimes as 'minor' or 'child,' and parent(s) and guardian(s) will be referred to collectively as 'parent(s).' In consideration of the services of The Horse Prayer, and its employees, representatives, volunteers, board members, and all other persons or entities associated with them (collectively referred to in this Document as The Horse Prayer, the undersigned volunteer and parent(s) of a minor volunteer, acknowledge and agree as follows:

I (and my Parent(s), if I am a minor) agree and acknowledge that participating in The Horse Prayer programs activities involves inherent and other risks, hazards and dangers that can cause or lead to injury, property damage, illness, mental or emotional trauma, disability or death to participant or others. The following includes some, but not all, of those risks, hazards, and dangers:

Risks present in outdoor environments including storms, strong winds, avalanches, snow or ice, or other objects, lightning, rapidly moving rivers or streams, currents, waves, stream or river crossings, extremely hot or cold weather or contaminated water, wild animals, disease carrying or poisonous animals or insects, and other natural or manmade hazards, unexpected animal movements or actions, and the like. Risks in decision making including, without limitation, the risk that The Horse Prayer may misjudge weather, terrain, water conditions, or route location, or they may misjudge a participant's or a volunteer's capabilities. Equipment may be misused, or may break, fail, or otherwise malfunction. Remote locations present risks including delays and difficulties with communication, transportation, evacuation and medical care. Medical facilities may be hours or even days away from the program location. Travel may be by foot, motor vehicle, horse, bicycle or other means and can be over rough and hazardous terrain. Conduct risks include the potential that the volunteer, other volunteers or participants, or third parties (e.g. general public, rescue personnel, or medical personnel) may act carelessly or recklessly.

RELEASE AND INDEMNITY AGREEMENT Please read carefully. This Release and Indemnity agreement contains a surrender of certain legal rights. I (adult volunteer or Parent(s) of a minor volunteer) agree as follows:

(1) to release and agree not to sue The Horse Prayer, its Board of Directors, employees, representatives, and other volunteers with respect to all claims, liabilities, suits or expenses (including attorneys' fees and costs) (hereafter collectively 'claim' or 'claims'), in any way connected with my/my child's enrollment or volunteering in these activities. I understand I agree here to waive all claims I may have against The Horse Prayer and agree that neither I, nor anyone acting on my behalf, will make a claim against The Horse Prayer as a result of any injury, damage, death or other loss suffered by me or my child; (2) to defend and indemnify ('indemnify' meaning protect by reimbursement or payment) The Horse Prayer with respect to all claims brought by or on behalf of me, my child, or a family member, in any way connected with my/my child's enrollment or volunteering in these activities or use of The Horse Prayer equipment or facilities.

This Release and Indemnity Agreement includes any losses caused or alleged to be caused, in whole or in part, by the negligence of The Horse Prayer (but not its gross negligence or intentional or reckless misconduct), and includes claims for personal injury, property damage, wrongful death, breach of contract or otherwise. The Horse Prayer is required by law to include the following: By signing this document you may be waiving your legal right to a jury trial to hold the provider legally responsible for any injuries or damages resulting from risks inherent in the sport or recreational opportunity or for any injuries or damages you may suffer due to the provider's ordinary negligence that are the result of the provider's failure to exercise reasonable care.

X _____

Signature of Volunteer or Guardian

Date

PLEASE PRINT: Name of Volunteer and/or Guardian

VOLUNTEER ASSUMPTION OF RISK CONTINUED...

These and other risks, hazards and dangers may result in volunteers falling, being struck, colliding with objects or people, experiencing vehicle collision, being thrown or falling from horse, drowning, reacting to weather conditions or increased exertion, suffering complications or allergic reactions, becoming disoriented, or experiencing other problems. These and other circumstances may cause hyperthermia, hypothermia, dehydration, heart or lung complications, broken bones, head injury, paralysis, or other injury, damage, death or loss.

I (volunteer and Parent(s) of a minor volunteer) acknowledge:

- I have accurately completed all required forms and reviewed and understand all The Horse Prayer program information and materials received;
- I have disclosed to The Horse Prayer any medical or physical conditions which may affect my (or my child's) volunteering in the program;
- The Horse Prayer representatives are available if I have questions about the physical demands of and the risks associated with these activities;
- The Horse Prayer cannot assure volunteers' safety or eliminate these or other risks.

Volunteer is voluntarily participating with knowledge of the risks. Therefore, volunteer (and Parent(s) of minors) assumes and accepts full responsibility for the risks of these activities (both known and unknown), and for any injury, damage, death or other loss suffered by volunteer (and Parent(s) of minors), resulting from those risks or resulting from volunteer's negligence or other misconduct.

X _____

Signature of Volunteer or Guardian

Date

PLEASE PRINT: Name of Volunteer and/or Guardian

MEDIA RELEASE

Volunteer Name: _____

Age: _____ M F

MEDIA/PHOTO WAIVER: I hereby authorize and give my full consent to The Horse Prayer to copyright and/or publish any and all photographs, videotapes and/or film in which I appear while attending The Horse Prayer event and programs. I further agree that The Horse Prayer may transfer, use or cause to be used, these photographs, videotapes, or films for any exhibitions, public displays, publications, commercials, art and advertising purposes, and television programs without limitations or reservations.

X _____

Signature of Volunteer or Guardian

Date

PLEASE PRINT: Name of Volunteer and/or Guardian