



Volunteer Application

Volunteer Information

Name: _____ Date of Birth: _____
Occupation: _____
Street Address: _____
City: _____ State, Zip: _____
Home Phone: _____ Work Phone: _____
Cell Phone: _____ E-Mail: _____

Emergency Contact Information

Name: _____
Phone number: _____ Relation: _____

Background Information

How did you hear about TOH? _____

Why do you want to volunteer at TOH? _____

Have you ever done volunteer work before? Where? How long?

Which areas would you enjoy participating in the most?

Barn chores _____ Fundraising _____ TOH Booths at Fairs and Shows _____
Grant Writing _____ Office Help _____ Distributing Materials _____



Previous Horse Experience

Total number of years working with horses: _____
Leading/Grooming: _____ Training on the ground: _____
Training under saddle: _____ Stall mucking & other barn chores: _____

Describe your horse experience:

VOLUNTEERS OVER THE AGE OF 18 MUST COMPLETE THE FOLLOWING:

These questions are asked for the protection of our staff and volunteers

Have you ever been convicted of a felony? Yes___ No___
Have you ever been convicted of sexual offenses? Yes___ No___
Have you ever been convicted of animal cruelty? Yes___ No___

If you answered yes to any of the above questions, please explain:

Applicant Signature

Participant's Signature: _____ Date: _____
Parent or Guardian Signature (If under 18): _____

Volunteers under 18 may not start volunteer service without parent or guardian signature

For office use only:
Participated in Orientation: Yes No Date: _____
Completed Liability Release: Yes No Date: _____