

SWFHR VOLUNTEER INFORMATION SHEET

The following "Volunteer Information Sheet" is considered as an application to volunteer at South West Florida Horse Rescue hereinafter referred to as "SWFHR", by which the further mentioned name hereinafter referred to as "Applicant", has an interest to voluntarily, free of coercion by way of monetary and/or other reimbursements, provide services and/or labor to all needs of SWFHR. There is no commitment to duration of efforts made by the Applicant. Volunteer efforts may commence after orientation / meeting with the Volunteer Coordinator. Applicant will always sign-in to the 'Volunteer Log' when performing any type of volunteering. Any off-site volunteer hours are to be logged accordingly, for detail see the Volunteer Coordinator (or Assistant Coordinator)

Confidentiality Statement: Volunteer information provided to South West Florida Horse Rescue, Inc. is confidential, and will only be used for volunteer planning and coordinating purposes. South West Florida Horse Rescue, Inc. will not disclose or distribute any information contained in these records beyond management volunteers, as needed.

<i>(Please Print Neatly)</i>		Date:	Respond Date:	Orientation Date:				
SECTION 1	[1a] First Name:	[1b] Middle Name:	[1c] Last Name:	[1d] Birth Day:	[1e] Under 18?			
	[2a] Address:		[2b] City:	[2c] State:	[2d] Zip Code:			
	[3a] Contact Phone:	[3b] Is this a Cell Phone?	[3c] Accept text messages?	[3d] Phone Carrier? For email-to-text	[3e] Occupation:			
	[4a] Volunteering for credit hours? ... if Yes, name of your institution. →		[4b] School or Institution:					
	[5a] Email:			[5c] Do you agree to opt into our mail-list: <i>This can be changed at any time.</i>				
	[5b] Alternate Email:			[5d] T-Shirt Size: (S, M, L etc.)				
	FOR ALTERNATE CONTACTING PURPOSES THE USE OF SOCIAL MEDIA IS IMPORTANT. THE FOLLOWING QUESTIONS PERTAIN TO OUR NEED OF COMMUNICATIONS ONLY. ALL QUESTIONS ARE COMPLETELY OPTIONAL AND ARE NOT REQUIRED. DO YOU USE:							
	[6a] Facebook? [6b] By what name:		[6c] Twitter? [6d] By what name:					
	[7a] Google Plus? [7b] By what name:		[7c] Other?>>> Site Name:					
	SECTION 2	PLEASE PROVIDE (2) EMERGENCY REFERENCES AND THEIR PHONE NUMBERS:						
[8a] Name:		[9a] Name:						
[8b] Relation:		[9b] Relation:						
[8c] Phone:		[9c] Phone:						
SECTION 3	YOUR AVAILABILITY. THIS IS A GENERAL QUESTION YOU ARE NOT LOCKED INTO A COMMITMENT. WE BELIEVE YOU'VE DECIDED TO VOLUNTEER WITH SWFHR FOR YOUR OWN REASONS SO WE DON'T HOLD YOU TO THE DAYS MENTIONED BELOW. THIS HOWEVER DOES GIVE US AN IDEA.							
	[10a] Available All or Part year: _____ (Month Range: [10b] _____ To: [10c] _____) [10d] What days of the week would you be available? ...or fill in the blanks under the days you are available, with the times you will be available.							
		Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
[10e] Other:								

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SECTION 4	YOUR EXPECTATIONS AND OPINIONS
	1. [11a] What do you expect to do at the rescue? (i.e. Groom, Clean the grounds, Event help, Fundraising, etc.)
	2. [12a] What should we know about you?
	3. [13a] Do you have horse experience or currently own a horse? [13b] ...if so explain?
	4. [14a] What are you allergic to?
	5. [15a] What are your hobbies or interests?
	6. [16a] Have you ever volunteered for any organization before? [16b] ...if so who, when, and for how long did you?
	7. [17a] What do you think you'd be good at doing for the Rescue?
8. [18a] How did you hear about us?	
SECTION 5	THE FOLLOWING QUESTIONS ARE FOR THE SAFETY OF OUR STAFF AND OTHER VOLUNTEERS, THIS INFORMATION WILL REMAIN CONFIDENTIAL:
	9. [19a] Convicted of animal cruelty or neglect? [19b] ...if yes explain:
	10. [20a] Have you ever been convicted of a felony? [20b] ...if yes explain:
	11. [21a] Have you ever been convicted of a sexual offense? [21b] ...if yes explain:

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SECTION 6	ACKNOWLEDGEMENTS (PLACE INITIALS UNDER EACH STATEMENT)	
	[22a] I hereby acknowledge that I have voluntarily applied to participate in activities that subject me to either being with, near, around, or in the area of equines while performing volunteer actions with SWFHR.	
	Initial:	
	[23a] I understand that the activity of being with, near, around, or in the area of equines to include horseback riding involves numerous inherent risks of injury that are my responsibility, and I assume these risks while performing volunteer actions with SWFHR.	
	Initial:	
	[24a] I further understand that an animal, to include equines, irrespective of its training and usual past behavior and characteristics may act or react unpredictably at times based upon instinct or fright which is a risk to be assumed by each individual independently in any activity of being with, near, around, or in the area of equines while performing volunteer actions with SWFHR.	
	Initial:	
	[25a] I understand and will inform myself of the Florida State Statutes chapter 773 (EQUINE ACTIVITIES) with special respect to section 773.04 as identified by Florida Law that the mentioning statement to follow will be posted in equine establishment performing equine activities.	
<i>WARNING: UNDER FLORIDA LAW, AN EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO, OR THE DEATH OF, A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES. - FLORIDA §§ 773.04</i>		
Initial:		
	[26a] I understand that I must sign in person, a liability release waiver for volunteering before any activities are performed. Additionally, I understand that annually a new liability release must be signed by my anniversary date.	
	Initial:	
SECTION 7	ENDORSEMENT OF REQUEST TO VOLUNTEER AND AFFIRMATION OF TRUTH BEHIND INFORMATION PROVIDED	
	Signature of Applicant or Online Verification noted as [4 digit Birth Year][Initials][Zip Code]	Date: