



VOLUNTEER APPLICATION

Thank you for your interest in our 501(c)3 non-profit organization!
Please complete this application form so that we can best consider
your interests and experience within our organization.

PERSONAL INFORMATION:

Date: _____

Female Male DOB (mm/dd/yy): _____

Name: _____

If under 18 years of age, print Parent/Guardian name:

Name: _____

Address: _____ City/State: _____ Zip: _____

Home Phone: (____) _____ Cell: (____) _____ Work: (____) _____

Employer/Occupation: _____

Email: _____

Providing my email address allows Helping With Horsepower™ to send me program news, updates, information, and etc. This email shall remain the property of HWH and will not be sold or given to any third parties.

How did you hear about us? _____

INTERESTS:

Which HWH program are you interested in (ok to choose more than one!)?

HWH SpiritHorse Program HWH Bike Rebuild Program HWH Entrepreneur Experience

Why do you want to volunteer with Helping With Horsepower™? (what do you hope to gain/contribute/ achieve?)

Please list any special skills that you could offer (i.e., grant-writing, maintenance, book-keeping, PR/Social Media, sign language)

Please describe your general background (*i.e., education, work experience*) _____

Any physical limitations to consider? _____

RELATED EXPERIENCE AND SKILLS:

Have you had previous experience working with individuals with special needs? No Yes

If Yes, please describe including specific skills/degrees: _____

Have you had previous experience working with at-risk youth or others that have suffered victimization/abuse?

No Yes If Yes, please describe including specific skills/degrees: _____

Have you had previous experience working with horses? No Yes

If yes, please describe: _____

Are you Certified In? First Aid CPR Certificate expires on: _____

Are you interested in serving on the HWH Board? No Yes

If yes, do you have any previous Board experience? _____

REFERRALS:

List 3 people that are not related to you and that you have known for more than 8yrs.

Name: _____ Phone: _____

How many years have you known this person? _____

Name: _____ Phone: _____

How many years have you known this person? _____

Name: _____ Phone: _____

How many years have you known this person? _____

PLEASE NOTE: Because of the nature of our programs, Helping With Horsepower™ does perform background checks, and may ask for references upon final consideration of a volunteer application. Are there any criminal charges (pending or on record) that may potentially be of concern when working with special needs, children and or at risk youth?

Date of occurrence: _____

General Liability Release

1. Participant agrees to assume Any And All Risks Involved In Or Arising From Participant's Use Of Or Presence Upon HWH, R-R and the Property And Facility including without limitation the risk of death, bodily injury, property damage, all kicks, bites, collisions with vehicles, horses, or stationary objects, fire or explosion, the unavailability of emergency care, or the negligence or deliberate act of another person.
2. Participant agrees to hold HWH, R-R, the Director and all its successors, assigns, subsidiaries, franchises, affiliates, officers, directors, employees and agents completely harmless and not liable, and releases them from all liability whatsoever, and Agrees Not To Sue them on account of, or in connection with any claims, causes of action, injuries, damages, costs or expenses arising out of the Participant's use of or presence upon HWH, and the property and facility, including without limitation, those based on death, bodily injury, or property damage, including consequential damages.
3. Participant agrees to waive the protection afforded by any statute or law in any jurisdiction whose purpose, substance and/or effect is to provide that a general release shall not extend to claims, material or otherwise which the person giving the release does not know or suspect to exist at the time of executing this release.
4. Participant agrees to indemnify and defend HWH, and the Director against, and hold it harmless from any and all claims, causes of action, damages judgments, costs or expenses, including attorney's fees, which in any way arise from the Participant's use of or presence upon HWH, and the property or facility at Reclamation-Ranch.
5. Participant agrees to abide by all of HWH, R-R and the property safety rules and regulations.
6. Participant acknowledges his/her participation with HWH is voluntary.
7. This contract is non-assignable and non-transferable, and is made and entered into in the State of South Dakota, and shall be enforced and interpreted under the laws of this State. Should any be in conflict with State law, then that clause is null and void. When HWH, the Director and Participant, or Participant's Parent or Legal Guardian if Participant is a minor, sign this contract, it will then be binding on both parties, subject to the above terms and conditions.
8. Warning: Under South Dakota law, an Equine Professional is not liable for an injury to and/or the death of a participant in equine activities resulting from the inherent risks of equine activities.

Signature: _____ Date: ____/____/____

Print: _____ Phone: _____

Mail this application to: Helping With Horsepower™
40787 259th St.
Mitchell, SD 57301

Email to: laura@helpingwithhorsepower.com or reclamationranch@gmail.com

Call with any questions! Laura Klock: 605-999-9824 or Crystal Young: 605-770-2867