



6920 Concession 1, R.R. #2, Puslinch, ON N0B 2J0 • 519-837-0558 • Fax 519-837-1233
www.sunrise-therapeutic.ca • info@sunrise-therapeutic.ca

VOLUNTEER APPLICATION

PERSONAL INFORMATION (please print)

NAME _____ DATE OF BIRTH _____ / _____ / _____
YY MM DD

HOME ADDRESS _____ Telephone _____

City _____ Postal Code _____

EMAIL ADDRESS _____

STUDENTS: TEMPORARY ADDRESS (If applicable): _____

City _____ Postal Code _____ Telephone _____

NAME OF SCHOOL / UNIVERSITY _____

FIELD OF EMPLOYMENT _____

PLACE OF EMPLOYMENT _____

Address _____ Telephone _____

May we call you at this number? Y / N

If "yes", what hours may we reach you there? _____ to _____

Please provide us with a contact name and number in case of an emergency:

Name _____ Telephone # _____ Relationship _____

Your Health Card # _____

BACKGROUND INFORMATION

Please describe your previous volunteer experience

Please describe your experience working with the disabled

Briefly describe your horse experience

Do you have Pony Club experience? Yes No If yes, highest level attained:

Do you have any coaching experience?

Do you have a C.E.F. coaching level? Yes No If yes, highest level attained? _____

Certificates Held: (University degree, Lifeguard, CPR, First Aid, Sign Language)

What do you hope to gain from your experience at Sunrise?

What qualities do you bring to this volunteer position?

HOW DO YOU WISH TO VOLUNTEER YOUR TIME? (Please check all that apply)

Therapeutic Riding: Weekly Lessons _____ Weekend Barn Chores _____ Cleaning Tack _____

Available: Morning _____ Afternoon _____ Evening _____ All _____

Public Relations: Golf Tournament _____ Mall Displays _____ Special Events _____

House & Home: Baking _____ Food Preparation _____

Technical: Computers _____ Photography _____ Video Filming _____ Office Support _____

Property Maintenance: Painting _____ Yard Work _____ Carpentry _____ Gardening _____

Summer Camp: Riding Lessons (Flexible 1 –2 hrs daytime) _____

How did you hear of SUNRISE?

- | | | |
|--|---|---|
| <input type="checkbox"/> Pennysaver | <input type="checkbox"/> Guelph Tribune | <input type="checkbox"/> Guelph Mercury |
| <input type="checkbox"/> Leisure Guide | <input type="checkbox"/> Rogers Cable | <input type="checkbox"/> Poster Ad |
| <input type="checkbox"/> Website | <input type="checkbox"/> Radio | <input type="checkbox"/> Other _____ |

Thank you for applying to become a volunteer with our program.

REFERENCES

Please give the name and telephone number of two people who will be prepared to act as references for you. They should not be members of your family, or close friends, but preferably someone you have worked for, or who is a teacher/professor or other professional person.

1. Name _____ Daytime Telephone Number _____

Relationship _____

2. Name _____ Daytime Telephone Number _____

Relationship _____

I give Sunrise Therapeutic Riding & Learning Centre authorization to contact my references. If my application is accepted, I agree to abide by the policies and procedures in the Volunteer Manual and any other requirements that may be added.

Signature

Date

If you have any questions or feel that you need more training in a particular area, please speak with the Coordinator of Volunteers.

THIS SECTION FOR OFFICE USE ONLY

Date Started: _____

Check List	Date completed
<input type="checkbox"/> Orientation	_____
<input type="checkbox"/> Training Clinic	_____
<input type="checkbox"/> Reference Check	_____
<input type="checkbox"/> Received Sunrise Pin	_____
<input type="checkbox"/> Received Volunteer Manual	_____
<input type="checkbox"/> Police Record Check	_____

NOTES:



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Sunrise Therapeutic Riding & Learning Centre
- Hereafter known as SUNRISE
RELEASE AND INDEMNITY

KNOW ALL MEN BY THESE PRESENT, I, _____ Do hereby:
(Please PRINT your name clearly)

Remise, release and forever discharge **SUNRISE**, their successors and assigns from any and all manner of actions, causes of actions, suits, debts, claims and demands whatsoever, which against **SUNRISE** I ever had, now have or may hereafter have as a result of, or in any way arising out of, any accident of injury to me or any loss or damage to my property howsoever suffered or caused while I am participating in, or engaged in, any manner whatsoever in activities sponsored by, supported or endorsed by **SUNRISE** and including, without limiting the generality of the forgoing, any preparation, therefore, or transportation to or from any such activities; and agree to indemnify and save harmless **SUNRISE** from and against all claims, demands, losses, damages, cost, charges and expenses whatsoever which **SUNRISE** may sustain or incur by reason of by being engaged in, or participation in, directly or indirectly, activities sponsored by, supported or endorsed by **SUNRISE**.

This Release and Indemnity shall be binding upon me and upon my next of kin, my heirs, executors, administrators, successors and assigns.

IN WITNESS HEREOF, I have hereunder set my hand and seal this
_____ day of _____, 20_____.
(Day) (Month) (Year)

SIGNED, SEALED AND DELIVERED
In the presence of:

} }

(Witness)

(Signature of Individual)

We, the undersigned, as parents or legal guardians of the above member, hereby join in the above Release and Indemnity on our behalf and on behalf of

SIGNED, SEALED AND DELIVERED
In the presence of:

} }

(Witness)

(Signature of Parents/Guardian)



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VOLUNTEER OBLIGATION

Because of the nature of this organization, we often obtain confidential information about riders, families, volunteers, and staff at Sunrise. It is essential that such information be kept in strictest confidence. Riders' affairs and conditions and the internal operation of Sunrise should never be discussed in public.

In view of this information, I hereby pledge that I shall respect each rider's privacy, and it is further understood by me that should I not abide by this regulation, my work as a Sunrise volunteer may be suspended or terminated.

DRESS CODE

It is expected that volunteers will be neatly and appropriately dressed while assisting in the barn or with lessons.

FOOTWEAR: When working with and around horses proper footwear is essential, it is a requirement of our insurance policy under which volunteers are covered. Boots or solid leather shoes with enclosed toes and heels will be worn. **Sandals are not acceptable.**

Dress appropriately for the weather. Lessons may be in the outside ring or on the trails. For example, a sun hat in summer, long underwear in winter, and gloves – hands must **NEVER** be in your pockets.

For a professional appearance and for safety reasons long hair must be tied back and secured off the shoulders.

Jewellery such as necklaces and long earrings are not permitted when working around horses. Chewing gum is not appropriate when working with clients in the barn or arena.

Alcohol, drugs and smoking are prohibited on the property.

**Please note: GLOVES are not required but are highly recommended for your safety.*

PHOTO RELEASE

The undersigned grants permission to take still and moving photographs and films to be used for the primary purpose of promoting and aiding the Sunrise Therapeutic Riding & Learning Centre and its work.

Regarding Photo Release: Yes No

I have read, understand, and agree to abide by the above-mentioned policies.

Signed: _____ Dated: _____

Witnessed: _____

Updated: 2009-01-07

POLICE CHECKS

Guelph City Police

- No charge if getting a police check for a volunteer position with a charity
- Residents of the city only
- Come in person – Hours: Wed 10-6pm, Thurs 9am-1pm, Fri 9am–5pm,
- Bring photo ID with date of birth, and be able to provide your address for the last 5 years.
- Will take 7 – 14 days to process, they will call you and get you to pick it up.

Kitchener / Waterloo / Cambridge

- \$20.00 / person
- They will provide you with a clearance letter if you have a clean record

O.P.P.

- They require a letter from Sunrise indicating our address, that we are a volunteer organization, etc. Volunteer can then bring this to the O.P.P.

This is just a bit of information regarding police checks, if you need more information please contact your local police department and they can let you know the cost (if any) and the procedure for your area.