New Volunteer Information Form

General Information:

Name: _____ Date: _____

Address: _____ City: _____ Zip: _____

Employer/School: _____

Work Address (City): _____

E-mail address: _____

Phone Primary: _____ Secondary: _____

Which is the best way to contact you: ☎ *phone* or ✉ *email* (please circle one)

Date of Birth: _____ Parent/Guardian/Care Giver: _____

Please describe your **current health status**, particularly regarding the physical/emotional demands of working in an equine-assisted program. Address fitness, cardiac, respiratory, *ALLERGIES*, bone or joint function, recent hospitalizations/surgeries or lifestyle changes:

_____

_____

_____

Have you volunteered with Majestic Hills Ranch before? ❑ Yes ❑ No If yes, what year? _____

Do you have any experience working with horses? ❑ Yes ❑ No If yes, please describe: _____

_____

_____

_____

Do you speak another language? ASL (American Sign Language) Spanish Other: _____

Are you trained in ***CPR***? ❑ Yes ❑ No ***First Aid***? ❑ Yes ❑ No

Check which areas you are interested in:

Program:
- ❑ Horse Handling
- ❑ Sidewalking with a Rider
- ❑ Barn Aide
- ❑ Facility Repairs / Projects
- ❑ Photography/Video
- ❑ Tack / Horse Cleaning & Care *(no riding)*

Administration:
- ❑ Volunteer Recruitment
- ❑ Volunteer Coordination
- ❑ Fundraising / Special Events
- ❑ Public Relations
- ❑ Newsletter (writing articles)
- ❑ Board / Committee Member

Photo / Video Release

I consent to and authorize the use and reproduction by Majestic Hills Ranch of any and all photographs and any other audio/visual materials taken of me for promotional material, educational activities, and exhibitions or for any other use for the benefit of the program.

❑ *I do NOT consent or authorize use of my likeness by MHR.*

Signature: _____ Date: _____
(volunteer/staff)

Signature of Guardian/Parent (if volunteer/staff is under 18 years old)

Signature: _____ Date: _____
(*Guardian/Parent)*

Background Information

Have you ever been charged with or convicted of a crime? ❑ Yes ❑ No If yes, please describe. _____

_____

_____

_____

I _____ (volunteer/staff), authorize Majestic Hills Ranch to receive information from any law enforcement agency, including police departments and sheriff's departments, of this state or any other state or federal government, to the extent permitted by state and federal law, pertaining to any convictions I may have had for violations of state or federal criminal laws, including but not limited to convictions for crimes committed upon children or animals.

I understand that such access is for the purpose of considering my application as an employee/volunteer, and I expressly DO NOT authorize Majestic Hills Ranch, its directors, officers, employees or other volunteers to disseminate this information in any way to any other individual, group, agency, organization or corporation.

Signature: _____ Date: _____
(volunteer/staff)

Signature of Guardian/Parent (if volunteer/staff is under 18 years old)

Signature: _____ Date: _____
(*Guardian/Parent)*

I understand that the information provided above is accurate to the best of my knowledge. I know of no reason why I should not participate in this center's program.

Signature: _____ Date: _____
(volunteer/staff)

Signature of Guardian/Parent (if volunteer/staff is under 18 years old)

Signature: _____ Date: _____
(*Guardian/Parent)*

VOLUNTEER LIABILITY RELEASE & CONFIDENTIALITY FORM

This form must be completed by and for each volunteer:.
PREMISES OWNER'S NAME IS KAREN (KIM) HOWARD & MAJESTIC HILLS RANCH FOUNDATION hereinafter known as MAJESTIC HILLS RANCH with a PHYSICAL LOCATION / ADDRESS of: 24580 DAKOTA AVENUE, LAKEVILLE, MN 55044; SCOTT COUNTY, MINNESOTA

PLEASE READ CAREFULLY BEFORE SIGNING

SERIOUS INJURY MAY RESULT FROM YOUR PARTICIPATION IN THIS ACTIVITY. MAJESTIC HILLS RANCH DOES NOT GUARANTEE YOUR SAFETY OR THAT OF ANY GUEST. IT IS HEREBY AGREED TO AS FOLLOWS THAT:

A. APPLICATION OF VOLUNTEER AND AGREEMENT PURPOSE I, the following individual hereinafter known as the "VOLUNTEER", and the parents or legal guardians thereof if a minor, do hereby voluntarily request and agree to participate in working with horses and riders with special needs on premises of MAJESTIC HILLS RANCH:

VOLUNTEER NAME & AGE (if under 21):_____

B. AGREEMENT SCOPE AND DEFINITIONS – This agreement shall be legally binding upon me the registered VOLUNTEER, and the parents or legal guardians thereof if a minor, my heirs, estate, assigns, including all minor children, and personal representatives; and it shall be interpreted according to the laws of Scott County, Minnesota. Any disputes by the VOLUNTEER shall be litigated in and venue shall be Scott County, Minnesota.
The term "HORSE" herein shall refer to all equine species. The term "HORSE HANDLING" or "LEADING" herein shall refer to riding or otherwise handling of horses, ponies, mules, or donkeys, whether from the ground or mounted. The term "VOLUNTEER" shall herein refer to a person who works with a horse mounted or otherwise handles or comes near a horse on the ground.
The terms "I", "me", "my" shall herein refer to the above registered VOLUNTEER and the parents or legal guardians thereof if a minor.

C. NATURE OF WORKING WITH / LEADING / RIDING HORSES – No horse is a completely safe horse. Horses are 5 to 15 times larger, 20 to 40 times more powerful, and 3 to 4 times faster than a human. If a Rider falls from a horse to ground it will generally be at a distance of from 3½ to 5½ feet, and the impact may result in injury to the Rider. Horseback riding is the only sport where on much smaller, weaker predator animal (human) tries to impose its will on, and become on unit of movement with, another much larger, stronger prey animal with a mind of its own (horse) and each has a limited understanding of the other. If a horse is frightened or provoked it may divert from its training and act according to its natural survival instincts which may include, but are not limited to: stopping short, changing directions or speed at will; shifting its weight; bucking; rearing; kicking; biting; or running from danger.

D. VOLUNTEER RESPONSIBILITY – Upon entering the premises, the VOLUNTEER with prior horse experience is responsible for assisting with the horses in class; going into the herd to bring them in; haltering and tying them safely; grooming them; tacking them; leading them in class; and assisting in general horse care. VOLUNTEERS without horse experience or those working with Riders will assist the Riders in selecting a proper fitting helmet; adjust straps as needed; assist with mounting the Rider; walk along side of the Rider / Horse team to assist with tasks; keep the Rider safely on the back of their Horse; help Instructors dismount Riders; and other general tasks.

E. CONDITIONS OF NATURE – MAJESTIC HILLS RANCH is NOT responsible for total or partial acts, occurrences, or elements of nature that can scare a horse, cause it to fall, or react in some other unsafe way. SOME EXAMPLES ARE: thunder, lightning, rain, wind, wild and domestic animals, insects, reptiles,

which may walk, run, fly near, bite and/or sting a horse or person; and irregular footing on out-of-door groomed or wild land which is subject to constant change in condition according to weather, temperature, and natural and man-made changes in landscape.

F. LIABILITY RELEASE – In consideration of MAJESTIC HILLS RANCH allowing my participation in this activity, under the terms set forth herein, I, the VOLUNTEER, and the parent or guardian thereof if a minor, do agree to hold harmless and release MAJESTIC HILLS RANCH, its owners, agents, employees, officers, members, premises owners, insurers, and affiliated organizations from legal liability due to MAJESTIC HILLS RANCH ordinary negligence; and I do further agree *that except in the event of gross negligence and willful and wanton misconduct*, I shall not bring any claims, demand, legal actions and causes of action, against MAJESTIC HILLS RANCH and/or its associates, for any economic and non-economic losses due to bodily injury, death, property damage, sustained by me and/or my minor child or legal ward in relation to the premises and operations of MAJESTIC HILLS RANCH, to include while riding, handling, or otherwise being near horses owned by or in the care, custody and control of MAJESTIC HILLS RANCH.

All VOLUNTEERS and Parents or Legal Guardians must sign below after reading this entire document:

SIGNER STATEMENT OF AWARENESS

I/WE, THE UNDERSIGNED, HAVE READ AND DO UNDERSTAND THE FOREGOING AGREEMENT, WARNINGS, RELEASE AND ASSUMPTION OF RISK. I/WE FURTHER ATTEST THAT ALL FACTS RELATING TO THE APPLICANT ARE TRUE AND ACCURATE.

_____

PRINT VOLUNTEER NAME

Signature: _____ Date: _____

(volunteer/staff)

Signature of Guardian/Parent (if volunteer/staff is under 18 years old)

Signature: _____ Date: _____

(*Guardian/Parent)*

Confidentiality Agreement

Majestic Hills Ranch shall maintain the right to privacy and the right of confidentiality of all individuals (participants, volunteers, and staff) involved in its programs and services. Participants, instructors, volunteers, and staff given access to any information on any individual participating in any program or service at Majestic Hills Ranch agree to keep all medical, personal, social, or other information strictly confidential. Any person violating the terms of this Confidentiality Agreement may be immediately reassigned or terminated from participation in the program.

I have read, understand, and agree to abide by this Confidentiality Agreement.

Signature: _____ Date: _____

(volunteer/staff)

Signature of Guardian/Parent (if volunteer/staff is under 18 years old)

Signature: _____ Date: _____

(*Guardian/Parent)*

Emergency Medical Treatment Form

☐ **Participant** ☐ **Staff** ☐ **Volunteer**

Name: _____ DOB: _____ Phone: _____

Address: _____ City: _____ Zip: _____

Physician's Name: _____

Preferred Medical Facility (if any): _____

Health Insurance Company (if known): _____

Allergies: _____

Allergies to medications: _____

Current medications: _____

In the event of an emergency, contact:

Name: _____ Relation: _____ Phone: _____

Name: _____ Relation: _____ Phone: _____

Consent Plan

In the event emergency medical aid/treatment is required due to illness or injury during the process of receiving services, or while being on the property of the agency, I authorize Majestic Hills Ranch to:

1. Secure and retain medical treatment and transportation if needed.
2. Release client records upon request to the authorized individual or agency involved in emergency treatment

This authorization includes x-ray, surgery, hospitalization, medication and any treatment procedure deemed "life saving" by the physician. This provision will only be invoked if the person(s) above is unable to be reached.

Signature: _____ Date: _____
(volunteer/staff)

Signature of Guardian/Parent (if volunteer/staff is under 18 years old)

Signature: _____ Date: _____
(*Guardian/Parent)*

Health Notes:

_____

_____

_____

When complete either mail, e-mail, or fax the forms to:

Kris Zieska, Majestic Hills Ranch
c/o Teachers On Call
3001 Metro Drive #200
Bloomington, MN 55425

Email: KZieska@MajesticHillsRanch.com

Fax: **952-888-6153**

PLEASE REMEMBER, if there is an emergency and you cannot make your schedule you must notify Kris Zieska ASAP! Please contact her by cell @ 952-426-5688.

2017 Riding Schedule

Dates of sessions (depending on weather)	**Week days**	**Session times – (max. five riders per class)**
Spring Session (Session 1) May 1st – June 15th June 19th – 29th Make Up Weeks	Monday – Thursday	4:00 pm, 5:30 pm, 7:00 pm
Summer Session (Session 2) (Morning classes) June 19th – August 3rd (Morning classes) August 7th – 17th	Monday & Thursday (Mornings)	9:00 am, 10:30 am (Mornings)
July 3rd – August 17th August 21st – 31st Make Up Weeks	Monday – Thursday	4:00 pm, 5:30 pm, 7:00 pm
Fall Session (Session 3) September 5th – October 20th Oct. 24th – Nov. 3rd Make Up Weeks	Monday – Thursday	4:00 pm, 5:30 pm, 7:00 pm

Note: the Ranch will be closed:

Memorial Day (Monday, May 29th) — *Make Up date: June 19th*
Independence Day (Tuesday, July 4th) — *Make Up date: Aug. 22nd*
Labor Day (Monday, Sept. 4th) — *Make Up date: Oct. 23rd*

Please choose your 1st or 2nd choice for the scheduled day.
Shifts are typically from 8:00 am to noon or 3:30 pm to 8 pm.

TIMES	**MONDAY**			**TUESDAY**			**WEDNESDAY**			**THURSDAY**		
	Session 1 *Spring*	Session 2 *Summer*	Session 3 *Fall*	Session 1 *Spring*	Session 2 *Summer*	Session 3 *Fall*	Session 1 *Spring*	Session 2 *Summer*	Session 3 *Fall*	Session 1 *Spring*	Session 2 *Summer*	Session 3 *Fall*
9:00 am												
10:30 am												
4:00 pm												
5:30 pm												
7:00 pm												

Are you able to substitute for other days / nights?
If so, please mark down those days with an "S." We will be calling for substitutes if we fall short of volunteers.

How did you hear about Majestic Hills Ranch? _____

2017 Program Schedule *(For you to keep)*

May – October, Weather Dependent

Dates of sessions (depending on weather)	Week days	Session times – (max. five riders per class)
Spring Session (Session 1) May 1st – June 15th June 19th – 29th Make Up Weeks	Monday – Thursday	4:00 pm, 5:30 pm, 7:00 pm
Summer Session (Session 2) (Morning classes) June 19th – August 3rd (Morning classes) August 7th – 17th	Monday & Thursday (Mornings)	9:00 am, 10:30 am (Mornings)
July 3rd – August 17th August 21st – 31st Make Up Weeks	Monday – Thursday	4:00 pm, 5:30 pm, 7:00 pm
Fall Session (Session 3) September 5th – October 20th Oct. 24th – Nov. 3rd Make Up Weeks	Monday – Thursday	4:00 pm, 5:30 pm, 7:00 pm

Note: the Ranch will be closed: *Memorial Day (Monday, May 29th)* *Make Up date: June 19th*
Independence Day (Tuesday, July 4th) *Make Up date: Aug. 22th*
Labor Day (Monday, Sept. 4th) *Make Up date: Oct. 23rd*

Each session is 7 weeks in length, with 2 weeks between each for potential make up lessons. If you are able to commit to the entire 9 week length, it would be greatly appreciated.

The initial volunteer training will be held several weeks prior to the start of the program at a couple different times. Training will be anywhere from 2 to 4 hours depending on weather and size of group attending. Volunteers coming into the program after the start of the program will be trained on the first evening of their participation.

Each lesson will have 5 leaders that are experienced with handling horses and up to two sidewalkers per rider. Leaders and sidewalkers will be paired with the same rider as much as possible, so that they can work as a team each week in order to develop individual goals.

Additional ranch chores will be done between classes, which may include cleaning stalls and paddocks, scrubbing and filling water tanks, cleaning the petting zoo area, cleaning the lounge, gardening, etc.

Morning shift is approximately 4 hours from 8:00 AM – 12:00 PM
Afternoon shift is approximately 4.5 hours from 3:30 PM – 8:00 PM.

CRITICAL: If an emergency arises, you must notify Kris 952-426-5688 ***as soon as possible*** so she can try to arrange for a substitute. If we are short volunteers, we cannot hold the sessions for the children. We count on you to follow through with your commitment. For 2017 we expect to have approximately 100 children involved in the program; that can mean we will need between 160 – 200 volunteers *per week* to run the classes. If you know of anyone else who would be interested in volunteering, please pass the information along to them.

Thank you *so very much for your support of our program!*
We could not do it without you!