



SOUTH JERSEY ALL BREEDS HORSE RESCUE

5745 Pleasant Mills Road
Weekstown, N.J. 08215
Federal Tax ID: 27-1993387



VOLUNTEER FORM

General Information

Name: _____ Date of Birth (mm/dd/yr): _____

Address: _____ Email: _____

Phone Nbr: _____ Alternate Nbr: _____

Are there any health issues we need to know about? Yes No

If yes, explain: _____

Emergency Contact:

Name: _____ Relationship: _____

Phone Nbr: _____ Alternate Nbr: _____

Experience and Skills

Do you have any experience around horses? Yes No

If yes, explain: _____

Which of the following interests you? (check boxes that apply)

<input type="checkbox"/>	Muck out stalls	<input type="checkbox"/>	Office Work	<input type="checkbox"/>	Landscaping/Excavating
<input type="checkbox"/>	Grooming	<input type="checkbox"/>	Fundraising	<input type="checkbox"/>	Fence Building
<input type="checkbox"/>	Leading	<input type="checkbox"/>	Public Relations	<input type="checkbox"/>	Plumbing
<input type="checkbox"/>	Riding/Training	<input type="checkbox"/>	Electrical	<input type="checkbox"/>	Carpentry

***** If you are under the age of 14 you will ALWAYS need a guardian present at this location *****

Signing this form will give us the right to use your photograph for the benefit of the rescue.

Are you under 18? Yes No

If yes: Parents Signature _____ Date: _____

Applicants Signature: _____ **Date:** _____



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VOLUNTEER FORM

Equine Activity Release and Hold Harmless Agreement

I, _____, the undersigned, have read and understood and freely and voluntarily entered into this Release and Hold less Agreement with **South Jersey All Breeds Horse Rescue** (referred to as the Company). I understand that this Release and Hold Harmless Agreement is a waiver of any and all Liabilities.

1. I understand the potential dangers that I could incur in. mounting, riding, walking, boarding and feeding said horse; including not limited to any interactions with other horses. Understanding those risks I hereby release the Company, it's officers, directors, shareholders, employees and anyone else directly-or indirectly connected with the Company from any liability whatsoever in the event of injury or damage of any nature (or perhaps even death) to me or anyone else caused by or incidental to my electing to mount and/or ride a horse owned or operated by South **Jersey All Breeds Horse Rescue**.
2. I understand and recognize and warrant that this Release and Hold Harmless Agreement is being voluntarily and intentionally signed and agreed to. I understand that in signing this Release and Hold Harmless Agreement, I know and understand that this Release and Hold Harmless Agreement may further limit the liability of equine professionals to include any activity whatsoever involving an equine, including death, personal injury and/ or damage to property.
3. I recognize and agree that I know which equine professional (s) I will be working with and acknowledge that said equine professional(s) has/have made reasonable and. prudent efforts to determine my ability to engage in the equine activity and has/have sufficient knowledge of my equine and horseback riding skills as to relieve, release and hold harmless said equine professionals from any continuing duty to monitor my equine activities.
4. I further voluntarily agree and warrant to Release and Hold Harmless this/these equine professional (s) from any liability whatsoever, including but not limited to, any incident caused by or related to said equine professional's (s) negligence relating to injuries known, unknown or otherwise herein not disclosed; including but not limited to, injuries, death or property-damage caused by mounting, riding, dismounting, walking, grooming, feeding, use of horse barn, paddock, trails or horse ring, in any capacity, falling off of horse whether horse is bucking, flipping, spooked, or my failure to understand any equine professional's directions relating to my riding or otherwise use and control or lack thereof, of my horse or the horse I have been assigned to.

Date: _____ Company: **South Jersey All Breeds Horse Rescue**

Person voluntarily entering into this: Release and Hold Harmless. Agreement:

Signed Name: _____ Printed Name _____

If a minor, person representing him/herself as the lawful Guardian under this Release and Hold Harmless Agreement: _____