

# EmpowerStride

## Volunteer Application

*Horses Teaching Humans One Step At A Time*

I appreciate your interest in volunteering! Please complete this form so we can match you with the best opportunities.

### Personal Information

Full Name	
Date of Birth	
Address	
City / State / ZIP	
Phone	
Email	

### Emergency Contact

Name	
Relationship	
Phone	

### Availability

Days Available (check all that apply)	<input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun
Preferred Time(s)	<input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Evening
How many hours per week/month would you like to volunteer?	

### Areas of Interest (check all that apply)

- Barn Buddy – horse care, cleaning stalls, feeding
- Program Assistant – helping with kids' camps & Minis & Me
- Horse Handler – leading/holding horses during sessions
- Event Helper – decorating, set-up, welcoming guests, fundraising events
- Creative Maker – crafts, props, social media, photos

- Fundraising Friend – donor letters, sponsorships, event planning, sales, sponsors, etc.
- Other (please describe): \_\_\_\_\_

**Experience**

Do you have any experience with:

- Horses?  Yes  No  
If yes, please describe: \_\_\_\_\_
- Working with children or individuals with special needs?  Yes  No  
If yes, please describe: \_\_\_\_\_
- Other skills (fundraising, photography, first aid, marketing, etc.)?  
\_\_\_\_\_

**Health & Safety**

Do you have any allergies or physical limitations we should know about?

\_\_\_\_\_

Are you comfortable working outdoors in various weather conditions?  Yes  No

**Acknowledgment**

I certify that the information provided is true to the best of my knowledge. I understand that volunteering involves working with animals and people and agree to follow all EmpowerStride safety guidelines.

Signature	Date

**For Office Use Only**

- Date Application Received: \_\_\_\_\_
- Orientation Completed:  Yes  No (Date: \_\_\_\_\_)
- Horse Handling Training:  Yes  No (Date: \_\_\_\_\_)
- Clearances Received: \_\_\_\_\_

Notes:  
\_\_\_\_\_  
\_\_\_\_\_

