

HorsePower for Kids Inc.

8005 South Racetrack Road Tampa, FL 33635 Main Line: (813) 855-8992 Volunteers: (727) 742-7736

<u>volunteers@horsepowerforkids.com</u> www.horsepowerforkids.com

HorsePower for Kids, Inc. is a 501(c)(3) non-profit organization whose mission is to provide a farm and petting zoo for people who would benefit from interaction with horses and other animals that reside on our farm.

HorsePower for Kids, Inc. is home of approximately 200 animals including: horses, ponies, farm animals, petting zoo animals, birds, wildlife animals, exotic animals, and reptiles.

HorsePower for Kids, Inc. is home of many animals rescued from local animal hospitals, wildlife rehab organizations, and farms. Our animals are protected under law and standards of the National Wildlife Rehab Association.

HorsePower for Kids, Inc.is licensed and animals are under protection of the Florida Fish and Wildlife Conservation Commission.

HorsePower for Kids Inc. invites individuals to connect and interact with animals. Our founder, Armando Gort, believes that "individuals, exposed to horseback riding, interaction with animals, and the fundamentals of caring for such species, develop a relationship that aids in all forms of social behavior."

HorsePower for Kids Inc. offers fun and educational opportunities for children and adults to interact and care for vulnerable animals. Such programs are introduced during Horse Camp Summer Programs, Field Trips, Birthday Parties, Farm Visits, Special Events, and more.

HorsePower for Kids Inc. needs YOU! Volunteer support is essential to our organization and animals. Volunteers help with the extra care and attention to all our animals. Volunteers may introduce the animals to the public or offer additional help when needed. It is a rewarding experience.

I have read and fully understand the above statements:			
X			
Signature	Date		

THIS APPLICATION IS FOR VOLUNTEERS 16 YEARS OF AGE OR OLDER. IF UNDER THE AGE OF 18, APPLICATION MUST BE SIGNED BY PARENT/LEGAL GUARDIAN. CHILDREN BETWEEN THE AGES OF 12-15 CAN BE LISTED AS THE "ACCOMPANIED VOLUNTEER" JOINING THE PARENT/LEGAL GUARDIAN WHO WILL BE LISTED AS THE APPLICANT.

Before completing this application, please read below:

Looking to volunteer or to learn more about volunteering at HorsePower for Kids? Donate your time and talent to help animals and individuals in the Tampa Bay Community by working while discovering the outdoors! HP4K is looking for people with various backgrounds, talents, and skill levels. Our needs are often specifically based on current events and levels of ground support to help the daily operations of the farm, but we'll try to best accommodate your desire to get involved. Thank you in advance for your interest!

- Volunteering is a rewarding community service.
- Volunteering means you want to help make a difference.
- Volunteering is a commitment.
- As a volunteer you serve others by supporting a cause without expecting anything in return.
- Volunteers are dedicated individuals who believe in the mission of this organization.
- Volunteers come from all economic, educational, and social backgrounds.
- Volunteers serve in areas where they have experience or where they are mostly needed.
- Volunteers are flexible with change and will help where asked.
- As a volunteer, you are a representative of this organization.
- Volunteers must be reliable, take initiative, and maintain a professional manner at all times.
- Volunteers are scheduled when needed. If absent, you must communicate with the Volunteer Coordinator.
- Volunteering also means that you will learn new things, make new friends, and have fun at the same time.
- YOU are what makes HP4K a great place to be!

I have read and fully understand these statements:

X	
Signature	Date

THE FOLLOWING IS MANDATORY. BY SIGNING THIS APPLICATION YOU WILL BE EXPECTED TO COMPLY BY OUR RULES AND POLICIES.

Characteristics of Volunteering:

*Commitment*Respect*Loyalty*Professionalism*Safety *Positive Attitude *Caring *Kindness and Compassion to animals and each other!

Volunteer Expectations: *Dress Code: Always wear your HP4K T-Shirt. Pants must be kneelength

- *Always wear closed shoes (No flip flops/sandals/opentoed shoes)
- *NO Drugs/Alcohol
- *No Smoking (designated areas upon request)
- *Orientation and Training required
- *As a volunteer you will commit to being honest and report to managements with concerns and questions
- *Committed to attending seasonal meetings and special fundraising events
- *Must be 16 years old to volunteer. Children between 12 -15 are invited to volunteering accompanied by parent or legal guardian.
- *HP4K needs your help, and you will be part of a team that relies on you to be there when you say you will be: "rain or shine!"
- *Must attach a release form (can be printed from our website)
- *Must submit a copy of your State ID or Driver's License along with application (because we serve children this is required for safety, and information will be kept confidential)
- *As a volunteer you will commit to being honest and report to management with concerns and questions.
- *As a volunteer you will commit to report any incident to management regarding the animals.

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X	
Signature	Date

Volunteer Applicant Conta	act Information: Today's Date:
First and Last Name:	
	Male or Female:
Address:	
	Cell Phone:
Email:	
Employment information:	
Current/Most Recent Emplo	oyer:
Address:	
Phone#:	
Position:	
How long have you been or	were employed?
Previous/Current Volunte Experience:	
Address:	
City:	State:Zip:
Volunteered in what areas:	
How long have you volunted	ered?

Language/s Spoken:	
Physical Limitations YN: If answered yes, please describe:	
Why would you like to volunteer at HorsePower for Kids?	
Are you volunteering for specific Community Service Hours for school for gaining other credit?: Y N	or
If, Yes, please explain:	
Name of school:	
How did you hear about us?	
Reference. Please, list 2 reference contacts other than those livir with you.	ıg
1. First and Last Name:	
Phone#:	
Relationship:	
2. First and Last Name:	
Phone#:	
Emergency Contact:	
First & Last Name: Phone#:	

	nvicted of or pleaded guilty, or no contest to a crime If yes, please explain:
Availability:	
Please, indicate below	which hours you are available to volunteer.
Sunto	
Mondayto	to
Tuesdayto	to
Wednesdayto	to
Thursdayto	_
Interest:	
Please, tell us in which	area you would like to volunteer:
ticket office	pony parties
walking ponies	fundraising
leaning stalls horse trail guide (adults only)	
grant writing	feeding animals
special events	gardening
field trips	wildlife rehab
TheraPlate (eynerience	with horses needed

Include the amount of time worked with and/or type of animals you may have worked with:
Special skills or qualifications skills and qualifications can be acquired through employment, previous volunteer work, or other activities such as hobbies or sports. What skills or qualifications do you have as a volunteer
What are you hoping to gain out of the experience of volunteering at HorsePower for Kids?
Accompanied Volunteers:
Please, ONLY two children per adult at a time – children must be between the ages of 12-15.
*Full Name:DOB:
Relationship (circle): Parent/Mother Parent/Father Guardian
*Full Name:DOB:
Relationship (circle): Parent/Mother Parent/Father Guardian

Applications must have a release form (one per individual including accompanied children volunteers) attached, which can be printed from our website or requested at the front booth. Copy of driver's license/ID must be attached. Incomplete applications cannot be processed. Please, allow approximately two weeks for processing. You will be called or emailed to set up an orientation.

Please, drop off or mail your completed application to:

HorsePower For Kids 8005 S. Racetrack Rd. Tampa, FL 33635

Attention: Saskia Ravelli

Email: volunteers@horsepowerforkids.com

It is the Policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability. Thank you for completing this application form and for your interest in volunteering with us.

I have read and fully understand that the information I have provided on this application is true and complete, to the best of my knowledge. I understand that any false or misleading statements made on this application may result in refusal or subsequent termination of my volunteer service. I authorize HP4K to verify any information in the application and to contact my references. I acknowledge that any service I would perform for HP4K would be on a strictly volunteer basis. I further recognize that I have no expectation of remuneration of any sort for such volunteer service.

Signing this agreement signifies that you have read and agree to the listed rules and guidelines.

Signature Applicant:	Date:
Parent/Guardian Signature (if applicant	is under the age of 18)
Print First and Last name if parent signature	e:

PARTICIPANT AGREEMENT, RELEASE AND ASSUMPTION OF RISK

WARNING

<u>Under Florida law, an equine activity sponsor or equine professional is not liable for an injury to, or the death of, a participant in equine activities resulting from the inherent risks of equine activities.</u>

In consideration of the services of Armando Gort, D.B.A., Horse Power for Kids, their agents, owners, officers, volunteers, participants, employees, and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as "HPK"), I hereby agree to release, indemnify, and discharge HPK, on behalf of myself, my spouse, my children, my parents, my heirs, assigns, personal representative and estate as follows:

1. I acknowledge that my participation Horseback riding activities entail known and unanticipated risks that could result in physical or emotional injury, paralysis, death, or damage to myself, to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity.

The risks may include, but is not limited to: being struck by rock fall or other objects dislodged or thrown from above; the forces of nature, including lightning, and weather changes; slips and falls or falling off the horse; exposure to temperature and weather extremes which could cause cold shock, hypothermia, hyperthermia (heat related illnesses), heat exhaustion, sunburn, dehydration; exposure to and travel in rugged terrain, exposure to potentially dangerous wild animals, insect bites, and hazardous plant life; accidents or illness can occur in remote places without medical facilities and emergency treatment or other services rendered; consumption of food or drink; improper lifting or carrying; my own physical condition, and the physical exertion associated with this activity.

A horse, regardless of its training and usual past behavior, may act unpredictably at times based upon instinct or fright which may cause you to be thrown from your horse or injured by the horse. Horses may do such things as bite, kick, buck, lie down, or stumble. Saddles may slip and other tack or saddle problems may develop as a result of normal use and wear. Your horse may collide with obstacles or encounter variations in terrain such as creeks, water, bridges, traveled roads, wild animals, birds, stump, forest growth, debris, rocks and cliffs and other obstacles whether obvious or not and whether man made or natural. Each of those obstacles or variations in terrain could cause you to lose control of you horse and you could fall. Riding a horse requires the participant to balance on the saddle. Participants may lose their balance that can result in falling from the horse.

Furthermore, HPK employees have difficult jobs to perform. They seek safety, but they are not infallible. They might be unaware of a participant's fitness or abilities. They might misjudge the weather or other environmental conditions. They may give incomplete warnings or instructions, and the equipment being used might malfunction.

- 2. I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation in this activity is purely voluntary, and I elect to participate in spite of the risks.
- 3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless HPK from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity or my use of HPK's equipment or facilities, **including any such claims which allege negligent acts or omissions of HPK**.
- 4. Should HPK or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.
- 5. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating, or else I agree to bear the costs of such injury or damage myself. I further certify that I am willing to assume the risk of any medical or physical condition I may have.
- 6. In the event that I file a lawsuit against HPK, I agree to do so solely in the state of Florida, and I further agree that the substantive law of that state shall apply in that action without regard to the conflict of law rules of that state. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against HPK on the basis of any claim from which I have released them herein.

I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms.

Print Name _____ Phone Number _____

PARENT'S OR GUARDIAN'S ADDITIONAL INDEMNIFICATION (Must be completed for participants under the age of 18)

In consideration of ______ (print minor's name) ("Minor") being permitted by HPK to participate in its activities and to use its equipment and facilities, I further agree to indemnify and hold harmless HPK from any and all Claims which are brought by, or on behalf of Minor, and which are in any way connected with such use or participation by Minor.

Parent or Guardian:	Print Name:	Date:		
PARTICIPANT AGREEMENT, RELEASE AND ASSUMPTION OF RISK				
PROTECTIVE EQUESTRIAN HEADGEAR REFUSAL AGREEMENT ADDENDUM				
I, for myself and/or on behalf of my child or legal ward, have been fully warned and advised by Armando Gort, D.B.A., Horse Power for Kids, (hereinafter collectively referred to as "HPK") that we should wear a properly fitted and secured ASTM/SEI (Equestrian standard) certified helmet while participating in horse riding activities in order to protect against and reduce the severity of potential head trauma that could result in serious injury, including death, as the result of a fall, collision, kick from a horse, or other occurrence associated with horse activities. Against the advice of HPK, the guide/instructor, common sense, and HPK's insurance company, I (and any Minor for whom I am signing) am refusing to wear a helmet and assuming all risk of injury. I further agree to indemnify and hold harmless HPK from any and all claims that are brought by, or on behalf of myself, and any listed Minor, as the result of head trauma resulting from participation in any horse activities.				
I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms.				
Rider or Participant:	Print Name:	Date:		

Parent or Guardian: ______ Print Name: ______ Date: _____

If the rider or participant is a minor: