



SARI Therapeutic Riding Volunteer Application Form

A. Personal Information (please print clearly)

Name: _____

Address: _____ City: _____

Postal Code: _____ E-mail address: _____

Phone: (h) _____ (c) _____ (w) _____

Do you have reliable transportation to and from SARI? Yes / No

Are you 14 years of age or older? Yes / No If not, when will you be turning 14? _____

How did you find out about SARI? _____

Please describe any allergies or medical conditions you have which you think we should know about:

B. Volunteer Opportunities

Please let us know the volunteer role(s) that interest you (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Therapeutic Riding Program (Horse Leader and/or Side Walker) | Special Events |
| <input type="checkbox"/> Grooming Program (Mon/Tues/Wed 10:30-11:30am) | <input type="checkbox"/> Ride-A-Thon (Fall) |
| <input type="checkbox"/> Camp SARI (Horse Leader and/or Side Walker, Camp Buddy or Leader In Training) | <input type="checkbox"/> Bowling for Ponies (Winter) |
| <input type="checkbox"/> Exercise Rider | <input type="checkbox"/> Grand Theatre (Spring) |
| <input type="checkbox"/> Instructor | <input type="checkbox"/> Golf Tournament (Summer) |

C. Program Volunteer Availability:

Please let us know when you are available (check all that apply):

- | | |
|---|---|
| <input type="checkbox"/> Fall Session (October – December) | <input type="checkbox"/> Spring Session (March – June) |
| <input type="checkbox"/> Winter Session (January – March) | <input type="checkbox"/> Camp SARI (July – August Monday-Friday 8:30am-4:30pm) |

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
<input type="checkbox"/> 4:50-5:20pm	<input type="checkbox"/> 10:30-11:30am	<input type="checkbox"/> 10:30-11:30am	<input type="checkbox"/> 10:30-11:30am	<input type="checkbox"/> 4:45-5:15pm	<input type="checkbox"/> 9:00-9:30am
<input type="checkbox"/> 5:30-6:00pm	<input type="checkbox"/> 12:30-1:00pm	<input type="checkbox"/> 3:15-3:45pm	<input type="checkbox"/> 1:00-1:30pm	<input type="checkbox"/> 5:30-6:30pm	<input type="checkbox"/> 9:40-10:10am
<input type="checkbox"/> 6:15-7:15pm	<input type="checkbox"/> 4:15-4:45pm	<input type="checkbox"/> 4:00-4:30pm	<input type="checkbox"/> 1:40-2:10pm	<input type="checkbox"/> 6:40-7:10pm	<input type="checkbox"/> 10:20-10:50am
<input type="checkbox"/> 7:20-8:20pm	<input type="checkbox"/> 5:00-5:30pm	<input type="checkbox"/> 4:40-5:10pm	<input type="checkbox"/> 4:00-4:30pm	<input type="checkbox"/> 7:15-7:45pm	<input type="checkbox"/> 11:00-11:30am
	<input type="checkbox"/> 5:50-6:20pm	<input type="checkbox"/> 5:20-5:50pm	<input type="checkbox"/> 4:30-5:00pm		<input type="checkbox"/> 11:40am-12:10pm
	<input type="checkbox"/> 6:30-7:00pm	<input type="checkbox"/> 6:00-7:00pm	<input type="checkbox"/> 5:10-5:40pm		<input type="checkbox"/> 12:20-12:50pm
	<input type="checkbox"/> 7:10-7:40pm	<input type="checkbox"/> 7:17-7:45pm	<input type="checkbox"/> 5:50-6:20pm		<input type="checkbox"/> 1:00-1:30pm
	<input type="checkbox"/> 7:45-8:15pm		<input type="checkbox"/> 6:30-7:00pm		<input type="checkbox"/> 1:40-2:10pm
			<input type="checkbox"/> 7:15-7:45pm		<input type="checkbox"/> 2:20-2:50pm

* Therapeutic riding lessons in the Fall, Spring and Winter program sessions take place from Monday to Saturday and run 30 minutes to 1 hour in length. Program volunteers are expected to arrive 30 minutes before the start of the lesson and stay 15 minutes after the lesson to groom, tack-up and un-tack the horses. For example, the estimated time commitment to volunteer in one 30 minute lesson would be approximately 1 hour and 15 minutes (not including personal travel time). Volunteers may sign up to volunteer in multiple lessons; however, scheduling is based on individual rider's volunteer needs.

D. Conditions of Volunteering:

SARI Program Volunteers are required to:

- be 14 years of age or older
- provide a current Police Records Check and Vulnerable Position Screening
(forms are available from the Coordinator of Volunteer Services at the SARI office)
- have reliable transportation to and from SARI
- attend a new volunteer training session
- abide by safety standards taught during the training session and ongoing instruction given by staff
- read and be familiar with all hints, safety tips and universal hygiene precautions
- not breach confidentiality with respect to all riders, staff and fellow volunteers and their information
- be available to volunteer on either a regular or fill in basis
- arrive 30 minutes before class to assist with grooming and tacking of the horses
- notify the office should you not be able to attend my volunteer shift well in advance
- be able walk and jog unaided across sand/loose dirt surfaces for up to 1 hour
- be highly attentive and responsive to their environment
- be able to work independently, or with little supervision
- be able to follow written and verbal instructions

SARI may conduct a telephone and/or in person interview with each new volunteer applicant upon receipt of their completed volunteer application form and decline an applicant if he/she is deemed unable to safely and independently perform the responsibilities and duties of a SARI volunteer.

E. Reference Checks:

Please provide contact information for two individuals who have known you for more than two years, are 18 years of age or older and are not related to you. SARI Therapeutic riding staff will contact your references and all information received will be treated confidentially.

First Reference:

Name: _____ Relationship to you: _____

Phone number: _____ Email: _____

Second Reference:

Name: _____ Relationship to you: _____

Phone number: _____ Email: _____

G. Signatures

Please sign below. You must be 14 years or older to volunteer at SARI.
Minors (under age 18) must also have a parent or guardian sign below.

*The information I have provided in this application form is true and accurate to the best of my knowledge.
I give my permission for SARI Therapeutic Riding to contact the reference provided.*

Applicant Signature _____ **Date:** _____

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

Please return completed form along to:

SARI Therapeutic Riding
Attention: Coordinator of Volunteer Services
12659 Medway Road, RR 1
Arva, Ontario N0M 1C0

Phone: 519-666-1123
Fax: 519-666-1971
Email: volunteer@sari.ca
Website: www.sari.ca

SARI treats all personal information as confidential and does not release it to any other organization. Any information provided may be used for data collection, fundraising or mailings. If you prefer to have your name excluded from any of these uses, please notify the SARI office at 666-1123.

Office Use Only	Application Received: _____	Tour: _____	Telephone Interview: _____
	Reference Checks: _____	Training Session: _____	Police Check Received: _____