

845-361-1429

# Juckas Stables Volunteer Application



Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone:(H) \_\_\_\_\_ (C) \_\_\_\_\_

**\*\*Volunteers under 18: Parent/Legal Guardian Information:**

Print Name \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Phone(s) \_\_\_\_\_

What motivated you to want to volunteer at Juckas Stables? \_\_\_\_\_

Describe other volunteer jobs you' ve had and for how long? \_\_\_\_\_

Dates & Times you are available to volunteer at JS: \_\_\_\_\_

Work/Volunteering Experience: *Examples of volunteer work available: Maintaining trails and fences, Cleaning barn, Camp helper, Tacking, Untacking, Tailing Rides, Marketing, Advertising, and more.* Describe any prior experience and skills you have with horses, children or other tasks above:

What strengths/skills will you bring to Juckas Stables? \_\_\_\_\_

What animals have you cared for and for how long? \_\_\_\_\_

Background Information: Have you ever been charged with or convicted of any crime? Y \_\_\_\_ N \_\_\_\_ Please explain:

**Health History:** *Doing Volunteer work with and around horses as well as doing fence and trail maintenance on 117 acres at Juckas Stables can be rewarding and invigorating but it can also be hazardous, tiring, strenuous and result in injury.* Please describe your current health status, particularly regarding your physical and emotional well being. Please include info about your fitness, cardiac, respiratory, bone and joint function, and/or recent hospitalizations/surgeries.

Allergies: \_\_\_\_\_ Medications: \_\_\_\_\_

Last Tetanus Shot: \_\_\_\_\_ Other Info for us to know? \_\_\_\_\_

**Risk Acknowledgement:** As a volunteer at Juckas Stables. Inc., I acknowledge the risks and potential for risks of working with horses, horseback riding, working on fences, trail maintenance, grooming, tacking/untacking, moving horses around etc. However, I feel that the possible benefits of volunteering are greater than the risk assumed. I hereby, intending to be legally bound, for myself, my heirs and assigns, executors or administrators, waive and release forever, all claims for damages against Juckas Stables Inc., and all their family members, employees and volunteers for any and all injuries and/or losses I may sustain while participating and volunteering at Juckas Stables . Inc. **Initial** \_\_\_\_\_ **Date** \_\_\_\_\_

**Confidentiality Agreement:** I understand that all information (written and verbal) about participants at Juckas Stables,Inc. is confidential and will not be shared with anyone without the express written consent of the participant and their parent/guardian in the case of a minor. **Initial** \_\_\_\_\_ **Date** \_\_\_\_\_

**Photo Release:** I \_\_\_\_\_  DO or  DO NOT initial consent to and authorize the use and reproduction by Juckas Stables of any and all photographs and any other audio/visual materials taken of me for promotional material, educational activities, exhibitions or for any other use for the benefit of the program.

**Health Considerations:** An important factor in considering whether to volunteer at Juckas Stables is the need to be on your feet and do strenuous work for extended periods of time. We operate in an environment in which exposure to dust, hay, pollen, animals and other potential allergens should be expected. All volunteers who have any health considerations should discuss this activity with their doctor prior to becoming a volunteer.

**Dress Code:** Volunteers absolutely must wear closed-toe, closed-heel shoes or boots that offer foot protection and sure footing. Long pants and short or long-sleeved shirts are considered appropriate attire for this job. For everyone's safety and comfort and to maintain a professional environment, volunteers are prohibited from wearing short-shorts or other revealing clothing, sagging pants, dangling jewelry and perfume. Cell phones and other personal electronics are not permitted and should be left in your vehicle or stored in a locker and turned off. For your safety, please do not chew gum during class. During the cooler months, dressing in layers is advised. At staff's discretion, we may ask you to change clothing or dismiss you from service if you are in violation of our dress code.

**Minimum Age Requirements:** All volunteers assisting with lessons in our arena must be at least 14 years of age. Staff will determine the appropriate duties for all volunteers, taking into consideration the desires of each individual.

**Injuries:** Any volunteer who sustains even the slightest injury while at Juckas Stables., Inc. is REQUIRED to report the situation to any program staff at the time the injury occurs. If you do not report it immediately, you are putting yourself and the safety of others at risk.

**Code of Conduct:** Volunteers are expected to conduct themselves in a professional manner and to show courtesy and respect to their fellow volunteers, our staff and students. Harassment of any sort will not be tolerated. Inappropriate behavior or language is grounds for dismissal. Smoking is not allowed anywhere on our premises. We greatly appreciate your prompt arrival, which allows us to conduct our work in a timely manner.

I understand that all the information provided in this application is accurate to the best of my knowledge. I know of no reason why I should not participate volunteer work at Juckas Stables. Your signature indicates that you have read, understood and agreed to abide by these guidelines.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent or Guardian's signature is required for anyone under the age of 18.



# VOLUNTEER LIABILITY RELEASE FORM

Name: \_\_\_\_\_ Phone # : \_\_\_\_\_ Age: \_\_\_\_\_ Today's Date \_\_\_\_\_

Email Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

Emergency Contact #1: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone #: \_\_\_\_\_

Emergency Contact #2: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone #: \_\_\_\_\_

**WARNING: UNDER NEW YORK LAW, AN EQUINE PROFESSIONAL OR EQUINE ACTIVITY SPONSOR IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES, PURSUANT TO SECTION 18-404 OF THE GENERAL OBLIGATIONS LAW.**

The undersigned volunteer, in consideration of participating in any and all horse related activities, hereby forever releases and discharges Juckas Stables Inc., its officers, directors, agents, wranglers, volunteers, advisors and/or representatives in any location where horse related activities are conducted or horses and/or property are used from any and all claims, rights, demands, actions, causes of action, expenses and damages of any kind which he or she may ever have, whether known or unknown. The undersigned further understands the risk involved in participating in volunteer activities to include serious injury or death and fully assumes said risk for any injury, loss or damage of any kind resulting from such associated activities.

It is further understood that all volunteers should maintain a policy of insurance covering medical treatment and all related costs in the event of an injury as a result of participating in any and all Juckas Stables Inc. activities and that should said volunteer choose not to maintain a policy of insurance that they are liable for medical treatment and all related costs in the event of an injury as a result of participating in any and all Juckas Stables Inc. activities. Volunteers hereby agree to assume all expenses, medical, liability, or otherwise, arising out of any injury to them while participating in any horse related activity or event either at Juckas Stables Inc. and understands that Juckas Stables Inc. does not provide health, accident, or liability insurance to participants in horse related activities.

I acknowledge that I must treat the horses and fellow volunteers with respect and dignity and under no circumstances will any form of abuse be tolerated against any animal or person, be it physical, verbal or otherwise, and should said referenced events occur I will be asked to leave and will no longer be eligible to participate in any Juckas Stables Inc. volunteer activities.

The person executing this Release acknowledges that there is a valid consideration to executing this Release. The invalidity of any statement or waiver of rights above under local, state or federal law does not invalidate any other statement or waiver of rights above and have read, fully understand and voluntarily agree to this Release and that no oral representatives, statements or inducements apart from this Release have been made to me.

### Medical Consent to Treat/Medical Consent to NOT Treat

In the event that emergency medical aid/treatment is required by me for illness or injury while on any Juckas Stables Inc. property or participating in any Juckas Stables Inc. related activity \_\_\_\_\_ **I DO** \_\_\_\_\_ **I DO NOT** authorize Juckas Stables Inc. to secure and obtain medical treatment and/or transportation if needed. (This authorization includes any treatment/procedure deemed "lifesaving" by a physician, hospital or other medical facility. This provision will only be invoked if emergency contacts listed above cannot be reached and Juckas Stables Inc. must act on my behalf.

Any known medical conditions/allergies: \_\_\_\_\_

Current limitations or medications: \_\_\_\_\_

Insurance Carrier: \_\_\_\_\_ ID#: \_\_\_\_\_

Physician's Name: \_\_\_\_\_ Physician's Phone #: \_\_\_\_\_

Volunteer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Guardian Name: \_\_\_\_\_ Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*I as parent or guardian of the above applicant, represent to Juckas Stables Inc. that the facts concerning my child or ward are true. I hereby give my permission for my child or ward to participate in any equine related activity, and, further, in consideration of allowing my child or ward to participate in such activities agree individually and on behalf of my child or ward, to the terms of the above foregoing release, waiver and indemnity agreement.*

