



VOLUNTEER APPLICATION

26 NW 701 Rd
Centerview, MO 64019
(816) 654-4881

Last Name: _____

First Name: _____

****PLEASE PRINT OR TYPE****

Volunteer Name: _____ Birth Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ Alternate Phone: _____

Are you over the age of 18? _____ Email address: _____

Occupation: _____ School: _____

VOLUNTEERS UNDER AGE 18 MUST HAVE PARENTAL CONSENT & RELIABLE TRANSPORTATION

Parent/Legal Guardian Name: _____

Relationship to Applicant: _____

Address: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ Alternate Phone: _____

Employment Phone: _____ Email address: _____

Please rank the following in order of preference. 1=most favorite, 10= least favorite:

No Experience Necessary:

Experience Necessary:

____ Barn chores/Horse care

____ Ranch Operations

____ Office/Administrative

____ Grant Writing

____ Volunteer Mentor

____ Training

____ Fundraising

____ IT Support

____ Special Events

____ Risen From the Ashes Ambassadors

Training is available for all volunteer opportunities.

AVAILABILITY TO VOLUNTEER AT RISEN FROM THE ASHES:

____ Mon ____ Tue ____ Wed ____ Thu ____ Fri ____ Sat ____ Sun

AVAILABILITY TO VOLUNTEER FROM HOME:

____ Mon ____ Tue ____ Wed ____ Thu ____ Fri ____ Sat ____ Sun



VOLUNTEER APPLICATION

26 NW 701 Rd
Centerview, MO 64019
(816) 654-4881

Last Name: _____

First Name: _____

How did you hear about us? _____

Why do you want to volunteer at RFA? _____

Have you ever volunteered before? Where? How long? _____

EXPERIENCE WITH HORSES:

Number of years working with horses (enter number of years in each space):

Leading/grooming _____ Training on the ground _____ Training under saddle _____

With green horses _____ Stall mucking _____ With "unbroke" horses _____

Full care/maintenance of a horse _____ Bathing horses _____ Foal care _____

Have you ever owned a horse? When? For how long? _____

Describe your horse experience: _____

ADDITIONAL EXPERIENCE/SKILLS YOU THINK WOULD MAKE YOU A BETTER VOLUNTEER: _____

IF YOU ARE OVER 18, PLEASE COMPLETE THE FOLLOWING:

Have you ever been convicted of a felony? _____

Have you ever been convicted of a sexual offense? _____

Have you ever been convicted of animal cruelty? _____

Signature: _____ Date: _____

(Volunteer or parent/guardian if under 18) ***Volunteers under 18 must have Parent/Guardian signature***

Parent Signature: _____ Date: _____

| |
|------------------------------|
| For office use only: |
| ____ Signed release |
| ____ Attended Horse Handling |
| ____ Attended Barn Chores |
| ____ Entered into database |