



A&A Horse Haven INC.
April Pearson Owner/Founder
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aahorsehaven@gmail.com
Phone Number: 2705647177
Non Profit 501c3 Rescue Organization
Serving Western Kentucky and surrounding counties
Owner surrender and Adoption Program

****Please answer all questions completely. All questions must have a response on the lines offered. If you do not know the answer to a question, "NO" is acceptable. We always provide educational information to the best of our ability.****

Volunteer Application

Name of applicant: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone: _____

Secondary Phone: _____

Volunteer Position

What would you like to do? _____

What Seasons _____

What days and hours? _____

What date can you start? _____

Do you want one time or recurring? _____

Do you have reliable transportation? _____

Personal Information

Are you 18 years of age or older? _____ If not, do you have a parent or legal guardian willing to sign the release of liability for you along with signing off on this application? _____

Do you know all of the risks working with large animals and understand that they can be unpredictable? _____

Do you agree that you can only do tasks that the staff at A&A Horse Haven INC. think you are capable of doing, to keep you and the horses safe? _____

Job Skills and Hobbies

Please list below your job skills and any qualifications you possess for any volunteer work at A&A Horse Haven INC. along with any hobbies you have.

References

Please provide 3 personal and/or professional references below. **(THIS IS REQUIRED TO BE A VOLUNTEER.)** Please make sure name, phone number and relation is printed.

Name: _____ Phone Number: _____
Relation: _____

Name: _____ Phone Number: _____
Relation: _____

Name: _____ Phone Number: _____
Relation: _____

Additional Information

Tell us why volunteering with is an interest for you

Do you have experience with horses? Please explain in DETAIL.

Please add anything you feel we should know qualifying you to become a volunteer.

Are you able to lift 50+ pounds if need be? _____

Do you have any physical limitations that you feel we should know about?

Agree and Sign

The relationship between our volunteers and A&A Horse Haven INC. is referred to as “at will” which means that it is your responsibility to keep us updated and let us know everything in order to keep our horses safe. However, due to specific nature of this volunteer program which entitles you to care for animals whom are dependent upon people for all of their daily needs, a minimum of a 2 week notice from the volunteer is expected if we have agreed on a reoccurring timeline is mandatory if you would ever like to come volunteer again at A&A Horse Haven INC. By initialing below you acknowledge all rules, risks and regulations!

Initials: _____

I understand that as a member of A&A Horse Haven INC. volunteer program I am obligated to do my best to keep myself, my coworker, and these horses safe and I understand that this volunteer program requires my commitment. Despite the fact that there is NO PAY attached, this position is a “job”. I understand that the rescue and the horses depend on me to show up for my scheduled days and times regardless of weather. I further understand that if I am a proficient rider I may be granted the privilege of riding a horse or pony for exercising at certain times to benefit them, but there is NO GUARANTEE that I will get to ride, it depends entirely on staffing to supervise the riders, availability and health of the various horses and weather permitting. If I am not a proficient rider but want to learn, I may be able to take lessons at a significantly reduced rate.

Initials: _____

Print Name: _____

Signature: _____

Parent/Guardian Print Name(if under 18): _____

Parent/Guardian Signature(if volunteer is under 18): _____

Date: _____

A&A Representative: _____