



CONTACT INFORMATION

Name \_\_\_\_\_ Date \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Primary Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Volunteers must be 18 or older. Do you meet this requirement? YES

AREAS OF INTEREST Indicate in which areas you are interested in volunteering.

Horse Leader Barn Buddy Special Events Fundraising

EXPERIENCE Tell us about any prior experience you have working with horses, special events or fundraising.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SPECIAL SKILLS, QUALIFICATIONS, & INTEREST Tell us about any other relevant skills and qualifications you possess. We would also like to hear why you are interested in becoming a volunteer.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Person to Notify in Case of Emergency

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Reference Check Contact #1

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Reference Check Contact #2

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email Address \_\_\_\_\_

AGREEMENT AND SIGNATURE By submitting this application, I am age 18 or older and affirm the facts set forth in it are true and complete. I understand that by providing this information I authorize HorseLink to complete a reference check. If I am accepted as volunteer, any false statements, omissions, or other misrepresentations made by me on this application may affect my opportunity to volunteer with the organization.

Signature \_\_\_\_\_ Date of authorization \_\_\_\_\_