



Rising Starr Horse Rescue
93 Silver Spring Road Wilton, CT 06897
www.Risingstarrhorserescue.org
(203)762-6046 or (203)257-8345

VOLUNTEER FORM

Name: _____ Age: _____ Gender: _____

Street: _____ City: _____ State: _____ Zip: _____

Phone #1: _____ Phone #2 _____ Email: _____

Parent/Guardian Name (if under 18): _____

Allergies or Special Needs: _____

Emergency Contact if other than Phone #1 or #2: _____

Medical issues that we need to know about that could impact your ability to work with large unpredictable
Animals _____

I would like to *(circle all that apply):*

- *Work directly with the horses
- *Help with fundraising efforts
- *Help with marketing/social media
- *Work outdoors (*fence repair, clearing trails, cleaning fields*)
- *Help with Volunteer Coordination

Check the line that applies to your horse experience:

- ____ Head of Herd: Must be comfortable handling horses, lunging, grooming, feeding
- ____ Yearling: Needs guidance from Head of Herd
- ____ Foal: Needs to shadow Head of Herd at all times

Please circle your availability:

Mon.	Tues.	Weds.	Thurs.	Fri.	Sat.	Sun
AM	AM	AM	AM	AM	AM	AM
Midday	Midday	Midday	Midday	Midday	Midday	Midday
PM	PM	PM	PM	PM	PM	PM

Please complete both pages and sign.

Release:

I/We _____, parent(s) or legal guardian(s) of _____(child), by enrolling myself or my/our child in RSHR Corp. Riding Program, certify that I/we acknowledge and accept the General Statutes of Connecticut Title 52. Civil Actions Chapter 926. Statute of Limitations Conn. Gen.Stat.s52-577p (1994):

Assumption of risk by person engaged in recreational equestrian activities, when each person engaged in recreational equestrian activities shall assume the risk and legal responsibility for any injury to his person or property arising out of the hazards inherent in equestrian sports, unless the injury was proximately caused by the negligence of the person providing the horse or horses to the individual engaged in recreational equestrian activities or the failure to guard or warn against a dangerous condition, use, structure or activity by the person providing the horse or horses or his agents or employees.

I/We hereby release RSHR Corp. and any staff members affiliated with RSHR Corp. from any responsibility for any occurrence which may result in injury, death, or other damages. I/We further state that I/we are of lawful age and competence to sign this affirmation and release, and that by signing I/we understand the terms therein. I/We assume all responsibility for (child's) _____ physical fitness and capabilities to perform under normal conditions of the RSHR Corp. Riding Program. In witness whereof I/we have executed this affirmation and release on this ____ day of _____ 2021.

Signature _____

Parent or Guardian Signature(s) 1st _____ 2nd _____

Photo Release:

I give permission for RSHR to use photos including my son/daughter named above for the webpage or other publicity that may involve photos such as the RSHR newsletter, flyers, brochures etc. At no time will RSHR use photos on the Internet except for the Farm webpage, Instagram, and Facebook.

Parent/ guardian signature as approval: _____ Date: _____

ALL VOLUNTEERS MUST WEAR CLOSE-TOED SHOES OR BOOTS

We ask that you provide 24 hours' notice for any time that will be missed so that we may plan accordingly. The horses rely on all of us for care. A "no show" will result in loss of volunteer privileges.