

# Volunteer Registration Form

Today's Date: \_\_\_\_\_

## I. Personal Information

Birth Date: \_\_\_\_\_

Name: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Address: \_\_\_\_\_

Home Ph: (\_\_\_\_) \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Ph: (\_\_\_\_) \_\_\_\_\_

May we contact you at work? (Yes (No

Cell Ph: (\_\_\_\_) \_\_\_\_\_

Parent/guardian/caregiver name & phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer/School: \_\_\_\_\_

Do you have any physical limitations? Describe: \_\_\_\_\_

## II. General Information

How did you hear about Whispers of Hope Horse Farm? \_\_\_\_\_

Why are you interested in volunteering with Whispers of Hope Horse Farm? \_\_\_\_\_

Have you volunteered with Whispers of Hope Horse Farm before? (Yes (No

Describe your experience with horses: \_\_\_\_\_

Whispers of Hope Horse Handlers must know how to groom, tack, lead horses and have knowledge of horse temperament. Do you qualify as a Horse Handler or Leader? \_\_\_\_\_

## III. Interest Areas

- |                               |                     |                             |
|-------------------------------|---------------------|-----------------------------|
| ( Sidewalker                  | ( Feeding Horses    | ( Strategic Planning        |
| ( Special Olympics Events     | ( Stable Care       | ( Special Events            |
| ( Coordinating Volunteers     | ( Equipment Care    | ( Public Speaking/Relations |
| (Preparing Posters/Signs/Etc. | ( Hay Hauling       | ( Marketing/Advertising     |
| ( Office Administration       | ( Ranch Maintenance | ( Committee Participation   |

### Skill Areas

- |                         |                     |                     |
|-------------------------|---------------------|---------------------|
| ( Horse Leader/Handler  | ( Computer Projects | ( Fund Raising      |
| ( Training Horses       | ( Fence Work        | ( Board Recruitment |
| ( Welding               | ( Carpentry         |                     |
| ( Plumbing              | ( Electrical Work   |                     |
| ( Facility Improvements |                     |                     |

Please list any other information about yourself, which you feel could be useful to the program. \_\_\_\_\_

Whispers of Hope Horse Farm

Entered by: \_\_\_\_\_

Date: \_\_\_\_\_