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**Volunteer Registration**

First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

Name of Parent or Guardian if under 18:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Permission to Email: \_\_Y / N\_\_

I learned of Bright Star Ranch through: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Experience with people who have a disability: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Experience with horses: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Emergency Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Availability for weekly schedule: (morning/afternoon/evening/anytime)

Monday: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Thursday: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tuesday: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Friday: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Wednesday: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Saturday: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I would like to: \_\_\_\_\_\_ work with riders in the lessons \_\_\_\_\_\_ work with horses

\_\_\_\_\_\_ help with clerical work \_\_\_\_\_\_ work in barn/facility

\_\_\_\_\_\_ help with special events

I have the following skills I would be willing at times to donate to Bright Star Ranch:

What is your preferred form of contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(phone, text, email)

Return to:

Nikki Murphy (Volunteer Coordinator/Marketing Director)

[nikki](mailto:nikki).brightstarranch@gmail.com

*Where potential & progress outshine the obstacles*

**Bright Star Ranch, Inc**

**Therapeutic Riding Center**

**1416 Rowland Rd.**

**Monroe, LA 71203**

**(318) 667-8271/(318) 512-4979**

[**nikki.brightstarranch@gmail.com**](mailto:nikki.brightstarranch@gmail.com)

**www.brightstarranch.net**

**BACKGROUND CHECK INFORMATION**

Bright Star Ranch desires to provide the best quality care and environment for all of our riders, their families, volunteers, and staff. Therefore, we will obtain criminal and civil background checks on all staff and volunteers who work with us. Your confidential information will be stored in a locked file.

First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Middle Initial: \_\_\_\_

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

City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Zip code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Driver’s License (or ID) #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State Issued: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Gender (please circle): Male Female Other Social Security #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**COVENANT OF VALUES AND ETHICS**

Bright Star Ranch was founded to serve the needs of and have a positive impact on our riders. With this as our mission, we have developed the following Covenant for Values and Ethics. This Covenant is part of our Code of Ethics found in the Bright Star Ranch Policies and Procedures Manual.

- I will be conscious of the fact that everything I do, directly or indirectly, has the potential to reflect upon Bright Star Ranch as a whole.

- I will conduct myself at all times with openness, forthrightness, and honesty in dealing with people and organizations, both internally and externally.

- I will hold myself to the highest possible standard of conduct reflective of the work that I do, always striving to avoid even the appearance of impropriety.

- I will treat everyone with dignity, worth, respect, concern, courtesy, and fairness.

- I will respect and comply with all applicable laws and regulations.

- I will exercise prudent stewardship of all Bright Star Ranch resources.

- I will avoid all “conflict of interest” relationships with board members, staff, suppliers, those we serve, and other organizations with whom I deal, unless disclosed and approved.

- I will accept no gifts or favors which might influence the performance of my responsibilities.

- I will also adhere to and comply with the defined standards of conduct of my profession.

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

Volunteer Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature (If volunteer is under the age of 18): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**VOLUNTEER COMMITMENT AND CONFIDENTIALITY AGREEMENT**

- I understand that as a volunteer of Bright Star Ranch, I may from time to time be exposed to or granted access to highly confidential or proprietary information. Examples of this information are: records of clients, personnel and volunteers, pictures/videos of clients/lessons, contribution information and financial data. I shall hold as absolutely confidential all information that I may obtain directly or indirectly concerning Bright Star business, riders, personnel or other volunteers. I further agree that I will not seek to obtain confidential information from a client. As a precaution to protect against disclosure of information, **I will assume ALL information is proprietary in nature and never give out any information regarding clients, staff or volunteers.** **All such request shall be referred to the Executive Director.**

- My services are donated to Bright Star without contemplation of compensation or future employment and given with humanitarian and charitable reasons

- I shall not give evaluative information to the parents or caregivers of clients. I will always discuss my concerns about a client’s performance with the instructor or staff person in charge of the activity

- I shall not sell or attempt to sell goods or services, request contributions, or solicit persons to sign or distribute political petitions on Bright Star premises

- I shall be punctual and conscientious, conduct myself with dignity, courtesy and consideration of others, and endeavor to make my work professional in quality

- I shall attempt to resolve any problems related with my volunteer activities with my supervisor, and if unsuccessful, attempt to resolve any such problems with the Executive Director of Bright Star Ranch

- I shall make my best effort to fulfill my commitment to Bright Star by completing all assignments I accept

- I shall, at all times, uphold the philosophy and standards of Bright Star Ranch

- I shall not use the Bright Star name/logo on printed materials, etc. without permission. This would be in violation of our branding requirements.

- I understand that Bright Star reserves the right to terminate any volunteer status as a result of:

- Failure to comply with Bright Star rules and procedures

- Absences without prior notification

- Unsatisfactory attitude, work or appearance

- Any other circumstances which, in the judgment of Bright Star staff, would make my

continued services as a volunteer contrary to the best interests of Bright Star Ranch

I have read each of the above conditions and I agree to be bound by them.

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

Parent/Guardian Signature (If volunteer is under the age of 18): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Volunteer Name (Printed): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**LIABILITY RELEASE**

I hereby acknowledge that I am choosing to participate in the Equine Therapy Program of Bright Star Ranch. I acknowledge the risks, but feel the benefits are greater than the risks. I hereby waive and release for myself, my heirs, executors, administrators, and assigns Bright Star Ranch, all of its riding personnel, its officers, directors, members, volunteers and all other persons regardless of their capacity who are in any way connected with this horseback riding and related activity, and their representatives, heirs, executors, administrators, successors, and assigns from any and all rights, claims, loss, or liabilities of any kind or nature, including costs and attorneys’ fees, that I might have in connection therewith, to the maximum extent allowed pursuant to the laws of Louisiana, including, but not limited to, LA. R. S. 9:2795.1. Furthermore**, I hereby acknowledge that said release will extend to any accidents, damages, or claims arising out of riding caused by my own acts or anyone or any animal within my control.**

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

**SAFETY RULES**

- No smoking

- No alcoholic beverages, drugs or other illegal substances may be brought onto the premises.

- If you open a door or gate, close it back. If it was locked, lock it back.

- Do not pet or feed horses without Bright Star staff supervision.

- Do not block barn or other parking with vehicles.

- All riders must have helmets on when around a horse.

- No climbing on fences

- All children must be supervised by an adult at all times when on the premises.

- Volunteers should not bring children to class.

- Only staff and volunteers trained as horse leaders are allowed in the paddocks.

**SAFETY RULES AROUND THE HORSES**

- No running, shouting or screaming around horses.

- Do not duck under the neck of a tied horse. It may startle the horse.

- When going around a horse, stay close to the tail and keep your hand on the rump or give wide berth in back of the horse.

- Do not kneel around a horse. It's hard to get out of the way quickly. Bend from the waist instead. (Remember to bend your knees slightly anytime you bend from the waist.)

- When releasing a horse in the pasture, take it through the gate, shut gate and turn the horse around to face the fence before releasing the lead line.

- If you are new to working around horses and are unsure about anything, always ask for assistance!

I acknowledge I have read and will abide by the above Safety Rules of Bright Star Ranch.

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

Volunteer Name (Printed): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent/Guardian (If volunteer/participant is under 18 years of age, **both** signatures are required.

**PHOTO RELEASE (OPTIONAL)**

I hereby consent to and authorize the use and reproduction by Bright Star Ranch of any and all photographs, film, and any other audio/visual materials taken of me for promotional material, educational activities, and exhibitions or for any other use for the benefit of the Equine Therapy Program at Bright Star Ranch. I understand that due to the expense incurred in developing many of Bright Star’s audiovisual materials, the consent given herein shall be irrevocable once Bright Star has relied on this consent in the development of promotional materials. I also give consent for my photo to be published on Bright Star Ranch’s social media and website pages.

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

Volunteer Name (Printed): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I do not** give consent for Bright Star Ranch to use my photograph: \_\_\_\_\_

Signature of Parent/Guardian (If volunteer/participant is under 18 years of age, **both** signatures are required.)

**EMERGENCY CONTACT INFORMATION**

Volunteer’s Name: Age:

Address: City: State: Zip:

Home Phone: Mobile Phone: Email:

In the event of an emergency contact:

1. Name: Telephone:
2. Name: Telephone:
3. Name: Telephone:

Doctor’s Name: Doctor’s Phone:

Preferred Medical Facility:

Health Care Insurance Company: Policy #:

Tetanus Shot: Y N Date:

Allergies:

Antidote needed: Y N Antidote carried: Y N

Protocol for Emergency Treatment:

Current Medications:

Please describe any medical condition requiring special precautions or treatment including HIV:

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