



Therapeutic Equestrian Center



Volunteer Forms Checklist

___ *Volunteer Application*

___ *Volunteer Contract for Services*

___ *Volunteer Emergency Medical Treatment and Health History*

___ *Volunteer Job Description and Agreement*

___ *Volunteer Waiver and Photo Release*

___ *Volunteer Horse Exerciser Application*

___ *Volunteer Liability Waiver - Minor or Adult - for Stockbridge
Equestrian Center*

*I have received and read a copy of the Volunteer Handbook for
Therapeutic Equestrian Center. I understand that my application must be
reviewed, updated or renewed on an annual basis.*

Signature _____

Date _____