



VOLUNTEER APPLICATION

Name: _____ Date: _____

Address: _____

Phone: (h) _____ (w) _____ (c) _____

Email: _____

Occupation/Employer: _____

May we contact you at work? **Yes No**

Please circle the days on which you would be able to volunteer: **M T W R F Sa Su**

Please circle times at which you would be available: **Morning Afternoon Evening**

Do you have experience with horses? **Yes No** Farm Animals? **Yes No**

Please rate your horse/farm-animal experience: **Beginner Intermediate Advanced**

Do you have experience with children with disabilities? **Yes No**

If yes, please explain: _____

Circle all volunteer activities that interest you: **Barn Work; Children's Programs; Office Work; Photography; Animal Socialization; Animal Grooming; Gardening; Special Events**

Please describe any specific skills of yours that would benefit programs at the Barn: _____

Do you have any physical limitations? If so, please explain: _____

Allergies? (Circle) **Animal Dander; Dust; Grass/Hay; Insect Bites; Other** _____

Emergency Contact (name and phone): _____

How did you learn about us? _____

Return Application to 350 Locust Grove Rd., West Chester PA 19382