

## **Volunteer Application**

Name:			Date of Birth:		
Address:			Shirt Size:		
City:		State:		Zip:	
Cell #:		Home #:			
Email:		Work #:			
Employer/Occupation:		May we contact you at work?:			
Are you 18 years of age or older?		What is your major area of interest?			
Do you have experience with children with disabilities or Autism Spectrum Disorder?					
If yes, please explain:					
Do you have experience with horses?	Do you have experience with farm animals? Which ones?				
Please rate your horse/farm animal experience:	ease rate your horse/farm animal experience: Beginner Intermediate		Advar	nced	
Please describe any specific skills or volunteer interests you might have.					
Do you have any physical limitations? Please explain.					
How did you learn about The Barn at Spring Brook Farm?					



610-793-1037 Phone Number: Physical Address: 350 Locust Grove Rd., West Chester, PA 19382 Mailing Address: PO Box 92, Pocopson, PA 19366 www.springbrook-farm.org

Website:



Name of Volunteer: \_\_\_\_

Self/Adult (18 years or older)

This release is executed and delivered this day of \_\_\_\_\_\_, 20\_\_\_\_\_, I being of age 18 or older, on behalf of heirs, executors, administrators, successors, and assigns (collectively the "Releasor") in consideration of being allowed to participate in any activities at The Barn at Spring Brook Farm, Inc., Releasor hereby fully releases and discharges The Barn at Spring Brook Farm, Inc., its successors and assigns (the "Releasee") from any and all rights, claims and actions which the Releasor may now have or may hereafter ever have against Releasee arising out of (your name) \_\_\_\_\_\_ participation in activities at The Barn. This Release is intended by Releasor to release any claim, damage, loss or injury suffered by Releasor, or which may be suffered by Releasor, and such rights which the Releasor may now have or will have in the future against the Releasee. Releasor acknowledges that Releasor has freely and voluntarily executed and delivered this Release to the Release and further, that Releasor has received good, valuable and adequate consideration prior to the execution and delivery of this Release.

Signature of Releasor:	Date:	
Witness:	Date:	

Self/Adult (18 years or older)

I give my permission for photographs and/or videos of myself to be used in any Promotional/Marketing materials for The Barn at Spring Brook Farm, Inc., including but not limited to The Barn's Facebook page, The Barn's youtube channel, and The Barn's website.

Signature of Releasor:	Date:
Witness:	Date:
Spring Bru	sok Jarm
Phone Number:	610-793-1037
Physical Address: 350 Locust Grove	e Rd., West Chester, PA 19382
Mailing Address: PO Box 9	2, Pocopson, PA 19366
Website: www.sprin	ngbrook-farm.org



Dear Volunteer,

The state of PA now requires all volunteers who come in contact with individuals under the age of 18 years old to complete the following 3 clearances. Those clearances are the PA State Police Criminal Record Check, PA Child Abuse Clearance, and the FBI Fingerprinting clearance.

Volunteers will be required to have these clearances in hand prior to beginning any volunteer work at The Barn. Clearances es will need to be updated every 5 years. These clearances can be used for multiple volunteer positions at multiple organizations. If you have these clearances from the past 5 years, please send up a copy of each for your file. For more detailed information, please feel free to visit: http://keepkidssafe.pa.gov/cs/groups/webcontent/documents/document/C\_135249.pdf.

PA State Police Criminal Record Check: https://epatch.state.pa.us/Home.jsp

COST: Free

PA Child Abuse Clearance: https://www.compass.state.pa.us/cwis/public/home

COST: Free

FBI Fingerprinting Clearance: https://www.pa.cogentid.com/index\_dpw.htm

COST: \$25.75 paid by credit card online.

If you have questions about any of the clearances, please contact Laura Feininger at laura.feininger@springbrook-farm.org or by calling The Barn's office at 610-793-1037.

After you have received your clearances, please submit a copy of each to Laura Feininger at The Barn's office.



Phone Number: 610-793-1037 Physical Address: 350 Locust Grove Rd., West Chester, PA 19382 Mailing Address: PO Box 92, Pocopson, PA 19366 Website: www.springbrook-farm.org

\*\*detailed instructions available upon request