



Therapeutic Riding
1270 Trotting Horse Ln
Missoula, Montana 59804
(406) 370-8477

Volunteer Application

Please Print Clearly

Name: _____
(Last Name) (Full First Name)

Mailing Address: _____

City: _____ **State:** _____ **Zip Code** _____

Home Phone: _____ **Cell Phone:** _____

E-Mail: _____

Text Message: YES/NO

Date of Birth: _____ **Age:** _____

Height: _____ *(Needed for sidewalker assignments)*

Employer: _____ **Occupation:** _____

- My employer gives time off for volunteering.
- My employer matches cash donations.

How did you hear about THTR? _____

Reason for Volunteering. _____

Describe your horse experience. _____

Describe Experience with individuals with disabilities? _____



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Can you walk for 45 minutes and jog short distances? No ___ If Yes, please explain: _____

Can you hold your arm above shoulder height and support a modest amount of weight?
Yes/No. (Circle)

Please describe any disorders, medical conditions or injuries that may impact your ability to manage the physical and/or emotional demands of working in equine assisted activities. Volunteer responsibilities may include communicating with others, following directions, working independently, walking for extended periods of time, jogging short distances, working in hot/humid/cold conditions, working with clients who may have mild to severe mental and/or physical challenges, and working with large animals.

Volunteer Opportunities

Your Volunteer Interests: *(please check all that apply)*

- **Lesson Program Volunteer.** I am interested in volunteering for the riding program in the following way(s).
 - Sidewalking Riders
 - Horse Leading (horse experience preferred; additional training required).
- **Equine Program Volunteer:**
 - Horse care, feeding, cleaning paddocks, etc.
- **Facility/Farm Volunteer**
 - General maintenance and repairs.
 - Carpentry
 - Equipment repair



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- **Special Events Volunteer**
 - Fundraising Activities
 - Serve on Special Event Planning Committees
 - Provide Assistance for Special Events
- **Special Skills Volunteer.** If you have skills, technical or professional experience that may be beneficial to THTR, we encourage you to share them with us.
 - Photography
 - Construction
 - Grant Writing
 - Other: _____

Please Indicate your Volunteer Availability.

	7-9 AM	9-11AM	11AM-2PM	2-4PM	4-6 PM
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					

How many days per week would you like to volunteer? _____

How many hours per day would you like to volunteer? _____

Would you like to be on a Volunteer Substitute list? _____

THTR'S program runs for 8 or 10 week sessions. Volunteers are asked to commit to the same day and same time for the duration of the session to develop a "team" for each rider.

Signature: _____ **Date:** _____