



Therapeutic Equestrian Center



Volunteer Application

Name _____ Date _____

Address _____
Street City State Zip

Phone(____) _____ (____) _____
Home Cell

Email Address _____ Date of Birth _____ Age _____

School _____

Address _____

May we contact you at work? Yes No Work Phone (____) _____

Volunteering takes dedication. How much time are you willing to commit as a Therapeutic Equestrian Center volunteer?

Please check your areas of interest:

- Horse Leader Side-walking with a Student Horse Care
- Stable Management Budget and Finance Newsletter
- Photography/Video Facility Maintenance Grant Writing
- Volunteer Recruitment Horse Exerciser Office
- Administration/Board Committee Member Public Speaking

Availability

The majority of our classes are held Monday through Thursday in the late afternoon and early evening. Saturday morning is the exception, with classes in the morning. Which days would work best for you?

Monday Tuesday Wednesday Thursday Saturday

Are you able to commit to a regular scheduled lesson time for eight weeks? Yes No

Are you available only on a sub or on-call basis? Yes No

Are you available for an occasional facility work day on a weekend? Yes No

Volunteer Questionnaire:

We would like to get to know you better. Please answer these questions briefly and to the best of your ability. Thank you.

How did you hear about TEC?

Please explain why you want to become a Therapeutic Equestrian Center Volunteer.

What do you hope to gain from this experience?

Have you been involved with therapeutic riding programs in the past? Yes No

Do you have previous experience with people who have disabilities? Yes No

Do you have previous experience with horses? Yes No

If yes: Have you been involved with 4 H? Yes No

Owned and cared for your own horse(s)? Yes No

Please list type of training and years of experience:

Are you willing to take classes to increase your knowledge? Yes No

Do you have a specific talent that might be useful to the Therapeutic Equestrian Center?

Do you have any questions or concerns about being a volunteer that you would like to discuss?

Please return all application forms to: Therapeutic Equestrian Center, P.O. Box 1250, Niles, Michigan 49120.