



VOLUNTEER FORMS CHECKLIST

Submit Application

Submit Registration Form

Pay Background Check Fee

Complete All Training Requirements

ADDITIONAL FORMS

Annual Renewal

CONSENT FOR CRIMINAL BACKGROUND CHECK

AUTHORIZATION, WAIVER and INDEMNITY

I, the Applicant named above, hereby give my permission for Education Leads to Success Foundation/ CJ'S Legacy Ranch to obtain information relating to my criminal history record. The criminal history record, as received from the reporting agencies, may include arrest and conviction data, as well as plea bargains and deferred adjudications. I understand that this information will be used, in part, to determine my eligibility for employment or a volunteer position with Education Leads to Success Foundation/ CJ'S Legacy Ranch. I also understand that, as long as I remain an employee or a volunteer with Education Leads to Success Foundation/ CJ'S Legacy Ranch, the criminal history records check may be repeated at any time. I understand that I will have an opportunity to review the criminal history report and a procedure is available for clarification if I dispute the record as received. I, the Applicant named above, do, for myself, my heirs, executors, and administrators, hereby remise, release, and forever discharge and agree to indemnify and hold harmless Education Leads to Success Foundation/ CJ'S Legacy Ranch and each of their officers, directors, employees, and agents from and against any and all causes of action, suits, liabilities, costs, debts and sums of money, claims and demands whatsoever, and any and all related attorneys' fees, court costs, and other expenses resulting from the investigation of my background in connection with my application to become an employee of, or volunteer for, Education Leads to Success Foundation/ CJ'S Legacy Ranch.

Applicant signature Date

Signature of parent/guardian Date

I. APPLICANT INFORMATION				
Legal last name	Legal first name	Legal middle name	Date of birth (month/day/year)	
Residence street address			Maiden name (if applicable)	
City, state, zip			County of residence	
Mailing address, city, state, zip (if different)			Race	
List all states lived in for past 10 years				
List any other names used within 10 years				
Social security no.		TX drivers license no.		
II. CRIMINAL DISCLOSURE			Yes	No
a). Has applicant ever been convicted* of any felony or misdemeanor criminal offense that was a sexual or physical assault in nature?				
b). Is applicant currently under indictment, awaiting trial, verdict or sentencing in any criminal proceeding involving a sexual crime or physical assault?				
c). Does applicant have any criminal arrest or citation, which has yet to be adjudicated that was a sexual offense or physical assault in nature?				
d). Is applicant presently on parole or probation or paying any restitution or fine for any crime that was a sexual offense or physical assault in nature?				

CONSENT for EMERGENCY MEDICAL TREATMENT

NAME _____

PARENT/GUARDIAN _____
(if under 18)

ADDRESS _____
Street City State Zip

PHONE _____

Home Work
PHYSICIAN'S NAME _____

PHONE: _____

EMERGENCY CONTACT:

Name _____

Phone _____ Relationship _____

Describe any medical condition requiring special precautions or treatment and any medications and dosage:

Please list all known allergies: _____

I, _____ ("Volunteer"), am over 18 years of age and fully competent to sign this Emergency Medical Form, which I have read and understand, or, if under age, Volunteer has obtained the signature of his/her parent/guardian, who, by such signature, represents he/she has read and understands this form. In case of medical emergency or necessity, "Volunteer" authorizes Education Leads to Success Foundation/ CJ'S Legacy Ranch to seek or provide for "Volunteer" such medical assistance as may be necessary or advisable and further authorizes Education Leads to Success Foundation/ CJ'S Legacy Ranch to seek the assistance of any physician or medical facility to provide any medical/ surgical care, including, but not limited to, hospitalization, with such treatment to include anesthesia as necessary or advisable, that the physician or medical facility deems or determines to be necessary or advisable, pending receipt by the physician or medical facility of any other consent to treatment from or on behalf of "Volunteer" "Volunteer" understands that NO LIABILITY can be accepted by any of the organizations concerned, including Education Leads to Success Foundation/ CJ'S Legacy Ranch, in the event such accident may occur. In the event any provision of this form is determined to be unenforceable, all other provisions shall remain in full force and effect.

SIGNATURE OF PARENT/GUARDIAN _____

SIGNATURE OF VOLUNTEER, IF OVER 18 _____

STATEMENT OF UNDERSTANDING, AUTHORIZATION RELEASE AND INDEMNITY

I, the undersigned ("Volunteer"), am over 18 years of age and fully competent to make this Statement of Understanding, Authorization, Release and Indemnity ("Statement"), which I have read and understand. I understand the information I have provided may be verified and permit Education Leads to Success Foundation/ CJ'S Legacy Ranch to inquire of others concerning my suitability as a volunteer. In the course of volunteering, I may deal with confidential information and agree to keep said information in the strictest confidence. The relationship between Education Leads to Success Foundation/ CJ'S Legacy Ranch and me is an "at will" arrangement and may be terminated at any time, without cause, by either Education Leads to Success Foundation/ CJ'S Legacy Ranch or me. I understand that, as a volunteer, I will assist in the riding and instruction of mentally or physically challenged riders, and that I will work with and around horses, as well as riders. I understand that I cannot serve as a volunteer until this Statement has been signed.

In return for the opportunity to serve as a volunteer with Education Leads to Success Foundation/ CJ'S Legacy Ranch, I hereby forever release, acquit and discharge Education Leads to Success Foundation/ CJ'S Legacy Ranch and its officers, directors, trustees, agents, employees, representatives, affiliates, successors and assigns (collectively the "Released and Indemnified Parties") from any and all claims, demands and causes of action of any and every kind or nature, including those caused in whole or in part by the negligence of any of the Released and Indemnified Parties, which I may now or in the future have against any or all of the Released and Indemnified Parties and that arise in whole or in part as a result of my involvement with Education Leads to Success Foundation/ CJ'S Legacy Ranch. I also understand and agree that Education Leads to Success Foundation/ CJ'S Legacy Ranch assumes no liability for accidents or acts of negligence or gross negligence by anyone, including the Released and Indemnified Parties.

I further agree to fully indemnify and defend any of the Released and Indemnified Parties against any and all claims, demands or causes of action of any and every kind or nature (including attorney's fees and other defense costs), including those caused in whole or in part by the negligence of any or all of the Released and Indemnified Parties, which directly or indirectly relate to personal injuries or property damages sustained by me and that arise in whole or in part as a result of my involvement with Education Leads to Success Foundation/ CJ'S Legacy Ranch. If any provision of this Statement is determined to be unenforceable, all other provisions shall remain in full force and effect.

Signature of Volunteer

Date

I represent to Education Leads to Success Foundation/ CJ'S Legacy Ranch that I am the parent or guardian of the Volunteer whose signature appears above. On behalf of that Volunteer, I agree and accept all of the provisions of the foregoing Statement of Understanding, Authorization, Release and Indemnity. I am authorized to sign this Statement on behalf of the Volunteer and my doing so legally binds the Volunteer as if he/she were not a minor.

Signature of Parent/Guardian

Date

CONSENT for PHOTOGRAPHY

(PHOTO RELEASE)

For valuable consideration given and which is hereby acknowledged, the Volunteer named above hereby grants to Education Leads to Success Foundation/ CJ'S Legacy Ranch permission to take, or have taken, still and moving photographs and films, including television pictures, of the Volunteer, and consents and authorizes Education Leads to Success Foundation/ CJ'S Legacy Ranch, its advertising agencies, news media, and any other persons interested in Education Leads to Success Foundation/ CJ'S Legacy Ranch and its work, to use and reproduce such photographs, films or pictures, and to circulate and publicize the same by all means, including, without limiting the generality of the foregoing, newspapers, television media, brochures, pamphlets, instructional materials, books, and clinical materials.

With respect to the foregoing matters, no inducements or promises have been made to secure this signature to this release other than the intention of Education Leads to Success Foundation/ CJ'S Legacy Ranch to use, or cause to be used, such photographs, films, and pictures for the primary purpose of promoting Education Leads to Success Foundation/ CJ'S Legacy Ranch and its work.

Please check one of the boxes to indicate your consent or non-consent of photo release: Consent Non-consent

Volunteer's Signature

Date

I represent to Equest that I am the parent or guardian of the Volunteer whose signature appears above. On behalf of the Volunteer, I agree to and accept all of the provisions of the foregoing Consent for Photography (Photo Release). I am authorized to sign this Statement on behalf of the Volunteer and my doing so legally binds the Volunteer as if he or she were not a minor.

Signature of Parent/Guardian

Date

CONFIDENTIALITY AGREEMENT

The undersigned volunteer of Education Leads to Success Foundation/ CJ'S Legacy Ranch Therapeutic Horsemanship acknowledges that in the course of volunteering, Volunteer may receive and have access to information and records of Education Leads to Success Foundation/ CJ'S Legacy Ranch clients, volunteers, and donors including but not limited to medical records, diagnosis, progress reports, and financial statements.

The volunteer hereby agrees to hold such information in confidence and not to divulge the information to any person except as directed by Education Leads to Success Foundation/ CJ'S Legacy Ranch. Volunteers also further agrees that written materials in the client, volunteer or donor's files will be maintained in confidence and not removed from such files.

Volunteer (signature)

Date

SOCIAL MARKETING POLICY

In the area of social media (print, broadcast, digital, online), the following guidelines apply in the use of social media for our volunteers:

1. Should you decide to create a personal blog or website, be sure to provide a clear disclaimer that the views expressed in the blog are the author's alone and do not represent the views of Education Leads to Success Foundation/ CJ'S Legacy Ranch Therapeutic Horsemanship.
2. All information published on any volunteer blog should comply with Education Leads to Success Foundation/ CJ'S Legacy Ranch's confidentiality policy. This also applies to comments posted on other social networking sites, blogs and forums.
3. Your on-line presence can reflect on Education Leads to Success Foundation/ CJ'S Legacy Ranch . Be aware that your comments, posts or actions captured via digital or film images can affect the image of Education Leads to Success Foundation/ CJ'S Legacy Ranch .
4. Do not use any Education Leads to Success Foundation/ CJ'S Legacy Ranch logos or trademarks without written consent

I hereby that I have read and understand the Social Media policy of Education Leads to Success Foundation/ CJ'S Legacy Ranch Therapeutic Horsemanship.

Signature

Date

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REFERRALS

PLEASE LIST TWO (NON-FAMILY REFERRALS)

NAME

RELATIONSHIP

CONTACT ADDRESS AND PHONE NUMBER

NAME

RELATIONSHIP

CONTACT ADDRESS AND PHONE NUMBER