

HOPE REMAINS YOUTH RANCH VOLUNTEER APPLICATION

1771 John Dodd Road, Wellford, SC 29385

Vision:

TO SEE EVERY PERSON INSPIRED TO FOLLOW CHRIST, HEALED FROM THE PAST, EQUIPPED TO BEGIN A NEW LIFE AND HAVE HOPE FOR THE FUTURE.

Mission:

HOPE REMAINS RANCH IS A PLACE WHERE YOUTH, FAMILIES AND ADULTS ARE TRANSFORMED THROUGH THE HOPE FOUND IN JESUS CHRIST USING COUNSELING, MENTORING AND EQUINE THERAPY.

VOLUNTEER INFORMATION:

Last Name	First		Middle	Today's Date:	When will you be able	to begin to volunteer?			
Street Address				Home Telephone	Home Telephone				
City, State, Zip				E-Mail Address					
Please provide the days and hours that you are available to volunteer:		Date of Birth: (if you are under the age of 18, you must have a parent or guardian sign) Month/Day/Yea							
Sunday	Monday	Tuesday	Wednesday	Thursday Friday		Saturday			
Start Time:	Start Time:	Start Time:	Start Time:	Start Time:	Start Time:	Start Time:			
End Time:	End Time:	End Time:	End Time:	End Time:	End Time:	End Time:			

ABOUT YOU:

Have you ever worked with horses before?	YES	NO			
If yes, please describe your experience:					
Have you ever worked with children and/or adults? YES NO					
If yes, please describe your experience:					
Why are you interested in working with children and/or adults?					
As a volunteer, what do you think your strengths are?					
Of the skills you possess, which would you like to offer volunteer services to Hope Remains Youth Ranch?					
Describe yourself in three to four sentences:					

IN WHAT AREAS WOULD YOU BE INTERESTED IN VOLUNTEERING?

Please check all that apply	What times we need help:	Description of duties:
	Monday - Friday 9:00 AM - 6:00 PM	HORSE CARE: Grooming (brushing and coat care before and after riding), hoof care (cleaning and picking debris from the sole), bathing, mane and tail detangling, feeding and providing fresh water.
	Monday - Friday 9:00 AM - 6:00 PM	BARN AND FIELD CARE: Mucking stalls, cleaning barn and field areas, and cleaning out feed/water buckets.
	Monday - Friday 9:00 AM - 6:00 PM	LANDSCAPING AND GROUNDS CARE: Maintaining and planting gardens, moving rocks, pulling weeds, mowing grass, clearing brush overgrowth, painting and mending fences, performing minor maintenance, and clearing trail paths.
	Monday - Friday 9:00 AM - 6:00 PM	CLEANING: Cleaning bathrooms and office areas and reorganize from time to time. Clean and sweep tack and feed rooms, take trash for pick up. General clean up of public areas.
	Monday - Sunday Varies	OCCASIONAL VOLUNTEER WORK: We keep a volunteer bank list for events. As a volunteer, you will be helping with fundraisers and events throughout the year. We rely on our volunteers to help with many things such as coordinating activities, helping children get on /off horses, supervising barn areas, going to community events, telling the public about our cause and handing out information.
	Monday - Friday 9:00 AM - 6:00 PM	ADMINISTRATIVE SUPPORT: Volunteering to help with administrative work such as filing, grant writing, coordinating, and assisting with marketing and fund raising.
	Monday - Friday 9:00 AM - 6:00 PM	STAFF SUPPORT: Volunteers need to be at least 12 years old and have some experience (e.g., be able to go get a horse unassisted, help with grooming and tacking and help with supervising students).



CONDITION AND NATURE OF MY RELATIONSHIP WITH HOPE REMAINS YOUTH RANCH

I HAVE AGREED TO WORK AS A VOLUNTEER FOR HOPE REMAINS YOUTH RANCH AND DO SO OF MY OWN FREE WILL. I ACKNOWLEDGE THAT I AM NOT AN EMPLOYEE OR AGENT OF HOPE REMAINS YOUTH RANCH. I UNDERSTAND THAT THIS ROLE DOES NOT INCLUDE COMPENSATION OR PAYMENT OF ANY KIND. FURTHERMORE, I ACKNOWLEDGE THAT HOPE REMAINS YOUTH RANCH DOES NOT OFFER HEALTH INSURANCE, WORKERS' COMPENSATION INSURANCE, OR ANY SUCH EMPLOYEE BENEFITS TO VOLUNTEERS.

The Fair Labor Standards Act (FLSA) defines employment very broadly, i.e., "to suffer or permit to work." An individual who is not employed in any capacity by a nonprofit organization and donates hours of service to the organization for civic or humanitarian reasons is a volunteer and not an employee under the FLSA so long as there is no promise or receipt of compensation for the services rendered, except for reimbursement for expenses, reasonable benefits, and nominal fees, or a combination thereof.

SELF-INSURED MEDICAL COVERAGE: I certify that I have adequate insurance to cover any injury I may suffer while participating, or otherwise agree to bear the costs of such injury or damage myself. I further certify that I have no medical or physical conditions, which could interfere with my safety in this activity, or am otherwise willing to assume and bear the costs of all risks that may be created, directly or indirectly, by any such condition.

RELEASE OF LIABILITY AND CLAIMS:

I fully recognize and accept that volunteering has risks and unforeseen dangers. I have read the job descriptions listed above and I am accepting and understand the minimum requirements. I understand that I have the right to review each activity prior to my participation and choose to participate of my own free will.

Acknowledgement: I certify that I have read and understand the rights explained to me above. If I did not understand, I was given the opportunity to ask questions and it has been explained to me in a language I understand, and I have been told that if I have any further questions about these rights, they will be answered. I acknowledge that my signing of this acknowledgement is a voluntary act on my part and that I have not been coerced into signing this document by anyone.

Volunteer Signature:	Date
Parent or Guardian Signature (if Volunteer is Under Age 18):	Date

Authorization to Obtain a Consumer Report and Release of Information for Volunteer Purposes

Pursuant to the federal Fair Credit Reporting Act, I hereby authorize Hope Remains Youth Ranch and its designated agents and representatives to

purpose of ap investigative of residences; en from any crim	oproving my participat consumer report may mployment history, in	tion in volunteer activities involving a include, but is not limited to, the following all personnel files; education any or all federal, state or county jurecords.	a youth-so llowing ar n; referen	erving org eas: verifi ces; credit	anization. I under cation of Social Se : history and repo	stand to ecurity rts; crir	he scope number ninal his	e of the consumer report/ corrent and previous tory, including records
acknowledge school, police designated ag	tion or public agency that my date of birth department, financia gents with any and all	authorize the complete releating have. I understand that I must p will not affect volunteer selection deal institution or other persons having information in their possession regal accepted with the same authority as	orovide m ecisions. I g personal ording me	y date of l hereby au knowledg in connec	oirth to adequate outhorize and requ ge of me to furnis	y comp est any h Hope	lete said present Remain	d screening and or former employer, s Youth Ranch or its
personnel, bo	oth individually and co	oth Ranch and its agents, officials, repollectively, from any and all liability for any liable with this authorization and	or damage	es of what	ever kind, which			
		federal Fair Credit Reporting Act, if a onsumer's right will be provided to n	-	e action is	s to be taken base	d upon	the con	sumer report, a copy of
Hope Remain	s Youth Ranch. SLED bout SLED procedure	ent Division (SLED) or another consur can be contacted by phone at 803.89 s is available at <u>sled.sc.gov</u> .						
	ner names used:							
Social Secur	ity Number				Date of Birth	Т		
Telephone N	lumber							
Current Stre	et Address							
City			State		Zip Co		ode	
Driver's Lice	nse Number			-	State Issued			
Prior Reside	nce, past seven (7) ye	ars						
Address:				From:		То:		
Address:					From:		То:	
Address:		Fr		From:		То:		
Address:					From:		То:	
Please Print C By signing bel		g that the above information is true a	and corre	ct.				
Signature						Date	e	



VOLUNTEER EMERGENCY NOTIFICATION INFORMATION

PRIMARY EMERGENCY	CONTACT						
Name:							
Relationship to Contact:	:						
Daytime Phone Number	r:						
Evening Phone Number							
Information Authorized to Receive:	No Restrictions	Life Saving Medical Only	No Me	edical			
SECONDARY EMERGENC	Y CONTACT						
Name:							
Relationship to Contact:							
Daytime Phone Number	:						
Evening Phone Number							
Information Authorized to Receive:	No Restrictions	Life Saving Medical Only	☐ No Me	dical			
In the event of an emergency, I authorize Hope Remains Youth Ranch and its affiliated agencies to notify the above contacts. I agree and understand that confidential medical information may be shared only to extent necessary for life saving measures. I agree to hold Hope Remains Youth Ranch and its' affiliated agencies harmless in such instances.							
Volunteer Signature:			Date:				
Print Name:							



RANCH RULES & RELEASES

IMPORTANT: NOTICE OF SC EQUINE LAW

SC Code of Laws - ARTICLE 7: Equine Liability Immunity

SECTION 47-9-710. Definitions: (as used in this chapter)

- (1) "Engages in an equine activity" means riding, training, providing, or assisting in providing medical treatment of, driving, or being a passenger upon an equine, mounted or unmounted, or a person assisting a participant or show management. It does not include being a spectator at an equine activity, except in cases where the spectator places himself in an unauthorized area and in immediate proximity to the equine activity.
- (4) "Equine activity sponsor" means an individual, a group, a club, a partnership, or a corporation, whether the sponsor is operating for profit or nonprofit, which sponsors, organizes, or provides the facilities for an equine activity, including, but not limited to, a pony club, 4-H club, hunt club, riding club, school and college-sponsored class, program, and activity, therapeutic riding program, and an operator, instructor, and promoter of an equine facility, including, but not limited to, a stable, clubhouse, pony-ride string, fair, and an arena at which the activity is held or a landowner who has given permission for the use of his land in an equine activity either by easement or other means.
- (6) "Inherent risk of equine activity" means those dangers or conditions which are an integral part of equine activities, including, but not limited to: (a) the propensity of an equine to behave in ways that may result in injury, harm, or death to a person on or around the equine; (b) the unpredictability of an equines reaction to sound, sudden movement, an unfamiliar object, a person, or another animal; (c) certain hazards such as surface and subsurface conditions; (d) collisions with other equines or objects; and (e) the potential of a participant to act in a negligent manner that may contribute to injury to the participant or others, as failing to maintain control over the animal or not acting within the participant's ability.
- (7) "Participant" means a person, amateur or professional, who engages in an equine activity, whether or not a fee is paid to participate in the equine activity.

SECTION 47-9-720. Equine liability immunity; exceptions to grant of immunity.

- (A) Except as provided in subsection (B), an equine activity sponsor or an equine professional is not liable for an injury to or the death of a participant resulting from an inherent risk of equine activity, and no participant or participant's representative may make a claim against, maintain an action against, or recover from an equine activity sponsor, or an equine professional, for injury, loss, damage, or death of the participant resulting from an inherent risk of equine activity.
- (B) Nothing in subsection (A) prevents or limits the liability of an equine activity sponsor, or an equine professional, if the equine activity sponsor, or equine professional: (1) (a) provided the equipment or tack and knew or should have known that the equipment or tack was faulty, and the equipment or tack was faulty to the extent that it caused the injury; or (b) provided the equine and failed to make reasonable and prudent efforts to determine the ability of the participant to engage safely in the equine activity and to manage safely the particular equine based on the participant's representations of his ability; (2) owns, leases, rents, or otherwise is in lawful possession and control of the land or facilities upon which the participant sustained injuries because of a dangerous latent condition which was known or should have been known to the equine activity sponsor, equine professional, or person and for which warning signs have not been conspicuously posted; (3) committed an act or omission that constitutes willful or wanton disregard for the safety of the participant and that act or omission caused the injury; or (4) intentionally injured the participant.
- (C) Nothing in subsection (A) prevents or limits the liability of an equine activity sponsor or an equine professional under liability provisions as set forth in the products liability laws.
- (D) The provisions of this article shall not cover or apply to any liability arising from the ownership, maintenance, or use of any motor vehicle.

HISTORY: 1993 Act No. 182, Section 1, effective July 1, 1993, and applies only to causes of action arising on or after this act's effective date.

RELEASE OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT PLEASE READ THE FOLLOWING CAREFULLY: BY SIGNING THIS AGREEMENT, YOU ARE GIVING UP CERTAIN LEGAL RIGHTS

Initial Here

ACTIVITY RISK CLASSIFICATION: I understand that I and/or my child will be participating in equine activities (as defined above) and that there are numerous obvious and non-obvious inherent risks always present in such activities. I understand that Hope Remains Youth Ranch has taken precautions to provide a safe setting, but I understand that the possibility of physical and emotional injury, death, or loss to persons and property is present. My/my child's participation is purely voluntary and I elect to participate in spite of these risks.

ASSUMPTION OF RISK: I understand the risks, conditions, and dangers inherent in all Hope Remains Youth Ranch activities, including equine activities. I agree to assume any and all risks involved in my/my child's use of or presence upon Hope Remains Youth Ranch property and facilities while engaging in any activity without limitation. These risks include, but are not limited to, death, bodily injury, property damage, falls, kicks, bites, unavailability of emergency medical care, the ordinary negligence of another person, and the deliberate acts of another person. I understand that if a horse is frightened or provoked it may divert from it's training and act according to its natural survival instincts which may include, but are not limited to, stopping short, spinning around, changing direction or speed, shifting its weight, bucking, rearing, kicking, biting, or running from danger. The same is true for other animals upon the property. I acknowledge that these are just some of the risks and I agree to assume others not mentioned above.

Office: (864) 249-3532

NATURE OF RIDING AND WORKING AROUND HORSES: I agree that Hope Remains Youth Ranch is not responsible for total or partial acts, occurrences, or elements of nature or unfamiliar sights, sounds or sudden movements that may scare an animal, including a horse, which may cause it to fall, or react in some other unsafe way. Some examples of unpredictable occurrences/elements/acts may include but are not limited to:

- thunder, lightning, rain, wind;
- wild and domestic animal encounters, insects, reptiles, which may walk, run or fly near, or bite or sting a horse or person; and
- irregular footing on out-of-door groomed or wild land which is subject to constant change in condition according to weather, temperature, and natural and man-made changes in landscape.

I also acknowledge that these are just some of the risks and I agree to assume others not mentioned above. I have inspected Hope Remains Youth Ranch's facilities and am satisfied that all premise conditions are reasonably safe for my/my child's intended purpose, usage and presence upon Hope Remains Youth Ranch's premises.

I acknowledge that Hope Remains Youth Ranch does not guarantee safety. In consideration of Hope Remains Youth Ranch allowing my/my child's participation in equine and/or other activities, I voluntarily waive, release, and agree to hold harmless Hope Remains Youth Ranch, its owners, board members, insurers, employees, agents, volunteers and affiliated organizations for all claims, accidents, injuries, or death, including those due to ordinary negligence of Hope Remains Youth Ranch, its owners, board members, insurers, employees, agents, volunteers and affiliated organizations; except in the event of Hope Remains Youth Ranch's gross negligence and willful and wanton misconduct. I understand that this document disqualifies me from recovering damages including any economic and non-economic losses due to bodily injury, death, or property damage, sustained by me/my child in relation to the premises and operations of Hope Remains Youth Ranch, to include riding, handling, or otherwise being near horses owned by or in the care, custody and control of Hope Remains Youth Ranch. I shall defend, hold harmless, and indemnify Hope Remains Youth Ranch, its board, employees, agents, and other volunteers from and against all claims, accusations, notices, judgments, rulings, liabilities, expenses, etc. that may exist as a result of my/my child's actions, inactions, errors, acts or omissions.

I expressly agree that the foregoing release and waiver of liability, assumption of risk and indemnity agreement is governed by the State of South Carolina and is intended to be as broad and inclusive as permitted by South Carolina Equine Liability Immunity Code of Law, and that in the event that any portion of this agreement is determined to be invalid, illegal, or unenforceable, the validity, legality and enforceability of the balance of the Agreement shall not be effected or impaired in any way and shall continue in full legal force and effect.

Hope Remains Youth Ranch Adult Helmet Waiver, Assumption of Risk, and Release of Liability

I, the undersigned, have been fully warned and advised by Hope Remains Youth Ranch that I/my child should wear protective headgear of a quality not less than SEI Certified ASTM Standard F1163 Equestrian Riding Helmet while riding and working around horses. I fully recognize and accept the inherent risks and unforeseen dangers of equine activities. I realize that I/my child am/is subject to injury from this activity and that no form of pre-planning can remove all of the danger to which I/my child am/is exposing myself/her/his-self. By signing either the acceptance below, I acknowledge I have been made aware that an ATSM/SEI approved equestrian helmet can prevent head injuries and/or traumatic brain injuries in the event of an accident. I am aware that Hope Remains Youth Ranch requires ALL riders to wear ATSM/SEI approved equestrian helmets while mounted and strongly recommends wearing ATSM/SEI approved equestrian helmets while working around equines. I acknowledge that I understand the following:

- ★ ALL RIDERS (ADULTS AND MINORS) MUST WEAR AN ATSM/SEI APPROVED HELMET WHILE MOUNTED.
- ★ ADULT PARTICIPANTS ONLY MAY DECLINE TO WEAR A SAFETY HELMET WHILE IN THE PRESENCE OF EQUINES AND IN DOING SO WILL ASSUME ALL RISK AND LIABILITY ASSOCIATED WITH THE ABOVE DESCRIBED DANGERS.
- ★ ALL MINORS ARE REQUIRED TO WEAR AN ATSM/SEI APPROVED HELMET AT ALL TIMES WHILE IN THE PRESENCE OF EQUINES.
- ★ REFUSAL TO WEAR AN ATSM/SEI APPROVED HELMET WHILE MOUNTED WILL RESULT IN REVOCATION OF RIDING PRIVILEGES. THIS APPLIES TO BOTH ADULTS AND MINORS.

In consideration of Hope Remains Youth Ranch allowing my/my child's participation in equine activities, I, for myself, my heirs, my successors, my assigns, and my legal representatives expressly agree to hold harmless, release and discharge Hope Remains Youth Ranch, and their owners, executors, administrators, assigns, employees, managers, directors, officers, attorneys, affiliated companies, and agents from all claims, causes of action, damages, liabilities, grievances, and demands of any kind, known or unknown against Hope Remains Youth Ranch arising out of or in connection with my/my child's participation in equine related activities. This release is for any relief, no matter how described. I understand and acknowledge my intent to release all claims that legally can be released.

DECLARATION OF FITNESS TO RIDE AND/OR PARTICIPATE IN EQUINE ACTIVITIES

I hereby declare that I, or my child, does not have physical or mental condition(s) that would prohibit me/him/her from participating in ANY equine activities related to Hope Remains Youth Ranch programs and services; and that I, or my child, am/is not participating against medical advice or treatment. In the event of an injury or illness, I understand that Hope Remains Youth Ranch staff will make every effort to contact the individuals listed on your emergency contact form. I understand and give consent for emergency treatment if neither contact can be reached and the injury or illness requires immediate medical attention. If such need arises, I agree to the release of any records necessary for treatment, referral, billing, and insurance purposes. I also give consent for Hope Remains Youth Ranch staff to inform the necessary parties of my, or my child's, physical or mental conditions (as applicable), including, but not limited to, food or other allergies, asthma, seizures, or medication. I understand that some activities at Hope Remains Youth Ranch are inherently risky, including, but not limited to, walking on uneven terrain such as gravel, dirt, sand, mud, wet and slippery surfaces; being exposed to weather conditions such as extreme heat; being exposed to environmental allergens such as hay, grass, saw dust, dirt and other airborne irritants know to exist in South Carolina. If you or your child is at an increased risk due to any of these conditions, please let us know.

I have read and understand the above disclaimer and it has been explained to me in a language I understand, and I have been told that if I have any questions about helmet use and safety around equines, they will be answered. I acknowledge that my signing of this safety notice and liability release is a voluntary act on my part and that I have not been coerced into signing this document by anyone. I acknowledge that by signing this release, I understand that the terms include myself and any minor children for which I am the parent or legal guardian.

Signature of Participant, Parent or Guardian	Date



The Bible: The Bible to be the only infallible, inspired, authoritative Word of God. All Scripture is given by inspiration of God. It contains truth without any mixture of error. We accept its authority over every area of our lives. Through it, we come to know God as revealed in the person of Jesus Christ.

God is the creator of all things. There is only one God, eternally in three persons: Father, Son and Holy Spirit. He is perfect, eternal, all-knowing, all-powerful, and present everywhere. He revealed Himself through Jesus the Messiah, who was born of a virgin, lived a sinless life, died on the cross as the full payment for the sins of all who believe, rose from the dead, and is coming again in glory.

Man is the special creation of God, in his own image. He created them, male and female as the crowning work of His creation. By his free choice, man sinned against God and brought sin into the human race. The sacredness of human personality is evident in that God created man in His own image, and in that, Christ died for man; therefore every person of every race possesses dignity and is worthy of respect and Christian love.

Salvation: Salvation involves the redemption, restoration, of the whole man-body, soul, and spirit. It is offered freely to all who willing believe and accept Jesus Christ as Lord and Savior. Salvation is by faith alone. It is neither earned or deserved it is a gift offered through God's grace. This gift was made possible through Jesus Christ who by shedding His own blood obtained eternal redemption for the believer. Salvation is a ONE time definite action accepted by man through choice and belief in the finished work of Christ on the Cross. In its broadest sense salvation includes regeneration, justification, sanctification, and glorification.

The Church: The Church is composed of all those who truly believe in the Lord Jesus Christ as Savior. It is the body and the bride of Christ. That every believer, whether Jew or Gentile, is baptized into the body of Christ by the Holy Spirit, and having thus become members of one another, we are responsible to keep the unity of the Spirit in the bond of peace.

Spirit lives within the believer empowering them to choose to reject sin and follow Christ. His role as Teacher, Comforter, Revealer, and Convictor of sin. He is the influencing Power that enables the believer to grow in Christ-likeness while on earth.

Saplism: The action of water Baptism is the outward symbol of what God has already done in a person's life through salvation. It identifies the believer as a follower of Jesus Christ and a member of His Kingdom. This baptism is not necessary for salvation because salvation comes through faith of the believer of Jesus' life, death, burial, resurrection, and His promised return.

