

HORSE, EDUCATION & RESCUE ORGANIZATION, Inc.

VOLUNTEER APPLICATION

PLEASE PRINT:				
Name		Date		
Address		City	NC Zip	
Home Phone	Cell Phone	Work Phone		
E-Mail		Gender	Birthdate	
NCDL#				
IF UNDER 18 Parent or Guardian (Volunteers under18 may not sta		t parent/guardian s	ignature)	
Name of Parent/Guardian				
Signature of Parent/Guardian				
Participant's signature:				
	Horse Exp	perience:		
Describe your horse experience:				
Other Experience/Talents/Skills y	ou wish to share:			
Why do you want to volunteer w	ith HERO?			

Barn Chores	Horse Care	Info Booths _	Concession Booths	PR
Community Outro	each Clerica	al/Record Keeping	g Fundraising Event	s
Days Available to	Volunteer: Week	Days: MTWT	F WEEKENDS: SAT SUN	
Times available:	ampm	hours at a time	Other:	
Which of these a	reas would you enj	oy participating i	in the most?	
☐ Training/l	nandling Horses	Trans	sportation of horses	
☐ Grant Wri	ting/PR	☐ Hand	y Man /Maintenance	
☐ Barn chor	es/feeding/grooming	Histor	rian/Photographer/writing artic	les
☐ Clinics, le	ctures, educational pro	grams	☐ Foster inspections, superv	ision
Emergency contact	ts:			
VOLUNTEERS OV	ER THE AGE OF 18	MUST COMPLETE	THE FOLLOWING:	
These questions a	re being asked for the	protection of our s	taff and volunteers.	
Have you ever bee	n convicted of a crime	, misdemeanor or f	felony, other than minor traffic	violations? If yes, please explain
		· ·		ted of Animal Cruelty?