

Therapeutic Horseback Riding for Children and Adults with Disabilities



at

Latta Equestrian Center

6201 Sample Rd., Huntersville, NC 28078

Volunteer Registration Package

NARHA Certified Therapeutic Riding Instructors:
Teresa Tucker (704) 701-4711 and Phyllis Smeaton (704) 740-6720
(North American Riding for the Handicapped Association)

Website: www.kidsrein.org

email: info@kidsrein.com

(Kids Rein is a 501(c) non-profit organization serving the local community)

WARNING:

Under North Carolina Law, Chapter 99 E of the North Carolina General Statutes, an equine activity sponsor or equine professional is not liable for an injury to or the death of a participant in equine activities resulting exclusively from the inherent risks of equine activities.

***Please complete and return pages 2 – 4 to KIDS REIN, c/o Teresa Tucker, 9122 Crofton Springs Dr., Charlotte NC 28269**

Volunteer Information and Release Form

Please Print all information

First Name: _____ Last Name: _____

Date of Birth: _____ Age: _____

Parents/Guardian Name (if applicable): _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email Address: _____

If student, name of school: _____

How did you learn of us? _____

Check which areas you are interested in:

- | | |
|---|--|
| <input type="checkbox"/> Horse Handling | <input type="checkbox"/> Public Relations |
| <input type="checkbox"/> Volunteer Coordinator | <input type="checkbox"/> Fund Raising |
| <input type="checkbox"/> Activities Coordinator | <input type="checkbox"/> Newsletter |
| <input type="checkbox"/> Leading a Horse | <input type="checkbox"/> Volunteer Recruitment |
| <input type="checkbox"/> Sidewalking with a student | <input type="checkbox"/> Other: _____ |

In the event of an emergency, contact:

Name: _____ Phone: _____

Liability Release

As a volunteer at Kids Rein at Latta Equestrian Center, I acknowledge the risks and potential for risks of a horseback riding program. However, I feel that the possible benefits to the clients I work with and myself are greater than the risk assumed. Thereby, intending to be legally bound, for myself, my heirs and assigns, executors or administrators, waive and release forever all claims for against Kids Rein, Inc., Teresa Tucker, Phyllis Smeaton, Country Time Carriages, LLC d/b/a Latta Equestrian Center, Mecklenburg Parks & Recreation Dept. or any employees, instructors, therapists, aides, volunteers, for any and all injuries and/or losses I/my son/my daughter/my ward may sustain while participating, volunteering, riding, or watching Kids Rein therapeutic riding program at Latta Equestrian Center, Huntersville, NC.

Date: _____ Signature _____

Photo Release

I hereby consent to and authorize the use and reproduction by Teresa Tucker, Phyllis Smeaton, Kids Rein, or Latta Equestrian Center of any and all photographs and any other audiovisual materials taken of me for promotional printed material, educational activities or for any other use for the benefit of the program.

Date: _____ Signature _____

I do not give my consent

Authorization for Emergency Medical Treatment

Please Print all information

First Name: _____ Last Name: _____

Date of Birth: _____ Home Phone: _____ Cell: _____

Address: _____ City: _____ State: _____ Zip: _____

Physicians Name: _____ Medical Facility: _____

Health Insurance Company: _____ Policy #: _____

Allergies to Medications: _____

Current Medications: _____

In the event of an emergency, contact:

Name: _____ Relation: _____ Phone: _____

Name: _____ Relation: _____ Phone: _____

In the event emergency medical aid/treatment is required due to illness or injury during the process of receiving services, or while being on the property of the agency, I authorize Teresa Tucker, Phyllis Smeaton, Latta Equestrian Center or trained volunteers/employees of Kids Rein and/or Latta Equestrian Center to:

1. Secure and retain medical treatment and transportation if needed.
2. Release client records upon request to the authorized individual or agency involved in the medical emergency treatment.

Consent Plan

This authorization includes X-ray, surgery, hospitalization, medication, and any treatment procedure deemed "life saving" by the physician. This provision will only be invoked if the person (s) above is unable to be reached.

Date: _____ Consent Signature: _____
Parent, or Legal Guardian (Signed in the presence of operating center staff)

Non-Consent Plan

I do not give my consent for emergency medical treatment/aid in the case of illness or injury during the process of receiving services or while being on the property of the agency. In the event emergency treatment/aid is required, I wish the following procedures to take place:

Date: _____ Consent Signature: _____
Parent, or Legal Guardian (Signed in the presence of operating center staff)

*Any personal or contact information submitted to Teresa Tucker or Phyllis Smeaton at Kids Rein is strictly confidential and will be maintained solely by the organization.

KIDS REIN

INFORMATION REGARDING PROTECTION OF PRIVACY

This document details how your medical information may be used or disclosed. Kids Rein uses your personal health information primarily for treatment. However, we may disclose your personal health information without prior authorization for public health purposes, for audits, when required by law, and in an emergency. In other situations, it is Kids Rein policy to obtain your written authorization before releasing personal health information. You may revoke this authorization at any time. Furthermore, you have the right to access a copy of your personal health information at any time.

I have read and understand Kids Rein policy regarding protection of privacy. I agree to the use and disclosure of my personal health information for purposes detailed in the above paragraph. I also agree not to disclose any of the rider/client personal, medical or any health related information to any other individuals without prior written authorization of the rider/client or their parent/guardian under any circumstances.

Printed Name: _____

Signature: _____

Date: _____

WARNING:

Under North Carolina Law, Chapter 99 E of the North Carolina General Statutes, an equine activity sponsor or equine professional is not liable for an injury to or the death of a participant in equine activities resulting exclusively from the inherent risks of equine activities.

Riding Guidelines

Our goal is to provide a safe and beneficial experience for our riders and volunteers. With this goal in mind, please familiarize yourself with the following regulations:

1. It is imperative that all paperwork is turned in within two weeks of your first volunteer assignment. If you are a minor, please have your parents sign the forms.
2. Please no siblings at or around the lesson areas. This distracts from the lessons.
3. Please, arrive 15 minutes before your assigned time. This gives you a chance to talk to the riders and other volunteers with whom you are working. Be sure to introduce yourself to your rider if this is the first time you are meeting each other.
4. No pets allowed.
5. As a representative of *Kids Rein* it is important that you present a professional appearance.
6. Please wear proper attire at all times. **No open toe shoes or sandals.** Boots are best for trail walking (you never know what you'll need to walk through). Dangling jewelry may be unsafe as it could become tangled or caught. No perfume please as some riders may be allergic and it attracts insects.
7. To lead a horse you must be at least 16 years of age (subject to certain exceptions made at the discretion of the Riding Instructor or the Director of the riding program). You must have horse handling experience, attended orientation, and have at least four (4) months Sidewalking experience.
8. To sidewalk you must be at least 15 years of age and have been through orientation.
9. When you arrive for the program always sign in and put a name tag on. There will be a list of tasks that's needed to be performed. Volunteers may be given tasks in the barn area (e.g. cleaning tack or stalls) and will work under staff supervision.
10. Be sure to assess (**PRIOR TO THE RIDE**) whether you will be able to properly assist the rider (e.g. the rider may be too heavy or may have a disability with which you are uncomfortable). If this is the case, you may ask the Riding Instructor to make a change.
11. Remember that as a volunteer (whether sidewalker or leader) you are responsible for a safe session and the safety of the rider always comes first. Always pay attention to your rider, your horse and your surroundings.
12. If you cannot make your scheduled volunteer time, please call as soon as possible.
13. Sidewalkers should never interfere with the horse, as **the horse is the sole responsibility of the leader.**
14. Never allow or assist your rider in mounting or dismounting unless you are under the direct supervision of the instructor.
15. Familiarize yourself with locations of phones, emergency phone numbers, off limit areas, fire extinguishers, the First Aid Kit and helmets!!!!

If there are concerns or questions, please feel free to contact Teresa Tucker at 704-701-4711 or Phyllis Smeaton at 704-740-6720.

SAFETY IS EVERYONE'S BUSINESS!!!!

FIRE SAFETY RACE

- R.** REMOVE horses from the barns and put in pastures or paddocks away from fire.
- A.** ALERT the fire department by dialing "911" and stating that there is a fire. Stay on the line and give them directions as outlined in the emergency poster.
- C.** CONTAIN the fire, if possible, by shutting doors, etc.
- E.** EXTINGUISH fire if possible by aiming the fire extinguisher at the base of the fire and gently pulling the trigger. Use wet blankets or dirt to try to smother flames. Only use water if you are sure that it is not an electrical fire.

EMERGENCY PROCEDURES

At least one time per month all classes will practice emergency procedures:

1. Everyone HALTS at command.
2. Volunteers dismount RIDERS.
3. Volunteer immediately goes to phone and uses emergency numbers posted.
4. First Aid care given immediately if needed.
5. Volunteers remove riders from areas to office.
6. If a minor, parent or guardian should be notified immediately.
7. If severe storm or tornado warnings occur, all students/clients and volunteers are to evacuate premises/farm.

VOLUNTEER TERMINATION POLICY

Volunteering at Kids Rein therapeutic riding program is a privilege. We do appreciate all of the skill, energy and commitment that our volunteers bring to our program.

In certain instances, however, it may be necessary for us to remove a volunteer from a specific class or from the Kids Rein program, or from the premises.

Please understand, for the safety, security and continuation of excellence in our program, an inattentive volunteer, or one who cannot perform the functions or duties of a volunteer, will be removed from a class and may be placed in other aspects of the program, at the sole discretion of the Kids Rein Staff. In some cases, a volunteer may be asked not to return to the Kids Rein Program.

Absolutely no intoxicated or chemically impaired volunteer will be allowed to work/volunteer at the Kids Rein Program. If there may be a question, Kids Rein Staff will err on the side of caution and will not permit the individual to volunteer.

“Important” Volunteer Guidelines

The following list outlines some of the things you can expect from the exciting experiences you are about to have and some things you should expect. Most of these are specific to therapeutic riding programs, while some are general to working with people with disabilities and with horses.

- ω To have fun and laugh a lot.
- ω To make great friends – both riders and other staff – and don’t forget the horses!
- ω To feel good about the work you’re doing.
- ω To work hard (and love it!).
- ω To learn a lot about others and yourself and teach others at the same time.
- ω To find out just how BIG your sense of humor really is...
- ω That no amount of money could equal all that you do...
- ω To do some of the most embarrassing things you’ve ever done, and to have a great time doing them.
- ω To be outdoors, a lot!
- ω To become a human ice cube and/or a human sweat machine.
- ω To step in horse manure.
- ω To get dirty and actually enjoy it!
- ω To get more out of an experience that you ever bargained for.
- ω To learn.
- ω To feel needed.
- ω To never have the exact same view of yourself, of others, or on life again.
- ω To grow in ways you’ve never known.
- ω To see a new meaning in a child’s smile.
- ω To get frustrated – and laugh about it.
- ω Just when you really think you know it all, to be quickly, and sometimes strongly, proven wrong.
- ω To test your vulnerability.
- ω To have an experience that you will always remember.
- ω To build everlasting bonds.
- ω To do things you never thought you could.
- ω To improve the quality of life for persons with disabilities.
- ω To make a huge difference in other peoples lives and probably never get to see just how much of a difference you made.
- ω To make mistakes.
- ω To work with people you like and people you don’t like.
- ω To work with people old enough to be your grandparents and young enough to be your children, grandchildren or even great-grandchildren.
- ω To test your sense of empathy.
- ω To treat people with disabilities the same as those without disabilities.
- ω To gain a heighten awareness of what it is like to have a disability.
- ω To be aware of other’s needs before your own.
- ω To have to deal with some uncomfortable situations – and laugh about it.
- ω To realize that “special needs” people ARE special – but more importantly, that they’re just like everyone else.
- ω To laugh at things that others find sad.
- ω To laugh at yourself.
- ω To be a friend to others who need your friendship more than you might ever realize.

“OK” – So What Shouldn’t I Expect?”

- ω To be expected to do something you don’t feel comfortable with.
- ω To be bored.
- ω To NOT step in the occasional “poop pile”.
- ω To regret your experience.
- ω To receive a lot of credit, even though there’s a lot of people who will really appreciate you.
- ω To have your own needs met at all times.
- ω To have things always go as planned.

So it is clear by now, working with *Kids Rein* will be demanding at times. Yet, **you are the core of our program** and are needed to help us to provide the highest quality of life possible for our riders. Keeping in mind that it is natural to be nervous and if you are sure that you are willing to try, then you are in for one of the **MOST rewarding and exciting experiences of your life!** We look forward to working with you in the upcoming sessions.

Thank you for VOLUNTEERING!!!

WARNING:

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**Any questions, please call:
TERESSA TUCKER (704) 701-4711 or PHYLLIS SMEATON 704-740-6720
www.kidsrein.org**

KIDS REIN

Non-Discrimination Policy

It is the policy of Kids Rein to provide equal opportunity in volunteer service and therapy. Accordingly, Kids Rein does not practice or condone unlawful discrimination in any form against staff, volunteers or clients on the grounds of race, color, religion, creed, sex, national origin, age, disability, or veteran status. Nor does Kids Rein allow discrimination on the basis of sexual orientation, with respect to internal organizational matters that do not contravene federal or state law and that do not interfere with Kids Rein relationships with outside organizations, including the federal government, donors, corporations and other means of support.

Discrimination based upon race, color, religion, sex, national origin, age, disability, or veteran status is in violation of federal and state law and Kids Rein policy, and will not be tolerated.

It should be noted that Kids Rein may make determinations related to its ability to effectively serve a client. There may be occasions when our professional staff determines that our therapies and programs may not be of benefit to a particular client. This is an analytical process and is not based on discrimination; it is a question of therapeutic effectiveness. Our ultimate goal is to provide programs and services that bring maximum benefits to each and every client.

Retaliation against any person complaining of discrimination is in violation of federal and state law and Kids Rein policy, and will not be tolerated.

Kids Rein will respond promptly to all complaints of discrimination and retaliation. Violation of this policy can result in serious disciplinary action up to and including total denial of access to the Kids Rein therapeutic riding program.

Kids Rein hereby affirms its desire to maintain an environment for all staff, volunteers and clients that is free from all forms of unlawful discrimination. Unlawful discrimination is completely incompatible with the values and goals of Kids Rein and will not be tolerated.

Definitions

Discrimination is unequal and unlawful treatment based upon race, color, religion, sex, national origin, age or disability. In addition, impermissible discrimination on the basis of sexual orientation would include conduct or decisions in violation of Kids Rein policy.

Retaliation is conduct causing any interference, coercion, restraint or reprisal against a person complaining of discrimination or participating in the resolution of a complaint of discrimination.

Harassment is a form of discrimination, and will not be tolerated.

Violations of Policy

Any individual with a concern, grievance or complaint of discrimination or retaliation should contact Kids Rein staff in writing at the following mailing address:

Kids Rein
c/o Teresa Tucker or Phyllis Smeaton
9122 Crofton Springs Dr., Charlotte, NC 28269