



LOVE for Therapeutic Riding

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www.LOVEforTherapeuticRiding.org

Tax ID 26-2965095

a faith-based, non-profit program 501 (c)(3)



Volunteer Forms Staffing Information for Volunteers

Volunteer Name: _____

Address: _____

City/State/Zip: _____

Home Telephone: _____ Work: _____

Cell Phone: _____ Email: _____

Web site: _____

May we add you to the LOVE for Therapeutic Riding volunteer information email list? Yes No

Employer/School: _____ Date of Birth: _____

How did you learn about LOVE for Therapeutic Riding _____

Can you: Lift 50 – 75 Lbs.? _____ If not how much comfortably? _____

Can you: Walk briskly for 50 minutes? _____ Jog for 10 minutes? _____

What hours are you available? Please check the times that you are available to work

	Sunday	Monday	Tuesday	Wed	Thurs	Friday	Sat
7 AM							
8 AM							
9 AM							
10 AM							
11 AM							
12 PM							
1 PM							
2 PM							
3 PM							
4 PM							
5 PM							
6 PM							
Other?							

LOVE FOR THERAPEUTIC RIDING is closed for sessions on Sundays

Check which activities you are interested in: ___ Horse Leader ___ Data Entry

___ Volunteer Coordination ___ Sidewalker ___ Cleaning tack ___ Board of Directors

___ Fundraising/event planning ___ Facility Maintenance ___ Publicity/Marketing

___ Newsletter ___ Horse Show ___ Telephone Calls ___ Stable help ___ Photography/video

_____ other? ___ Instructor** ** For more information, see the Director about requirements