



Rising Starr Horse
Rescue
93 Silver Spring Rd
Wilton, CT 06897

EIN#47-4027991

Volunteer form

Name _____ Age _____ Sex _____

Street _____ City _____ State _____ Zip _____

Phone#1 _____ Phone#2 _____ Email _____

Parents Name if under 18 _____

Emergency Contact if other than Phone #1 or #2 _____

Allergies: _____ Insurance: _____

Medical Issues that we need to know about? _____

Do you want to work directly with horses? Yes / No

Do you want to work from the "office" not the barn Yes / No

Volunteer/Team Programs:- Check the line that applies:

Teams: runs on a 12 week cycle:

Head of the herd: Must be comfortable handling horses, lunging, grooming, feeding. _____

Yearling: Needs the guidance from Head of the herd. _____

Foal: Needs to shadow the Head of the Herd at all times. _____

Monday: am midday pm

Tuesday : am midday pm

Wednesday : am midday pm

Thursday : am midday pm

Friday : am midday pm

Saturday : am midday pm

Sunday: am midday pm

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Please be sure to fill out all sheets completely. We will notify you as soon as possible to set up a evaluation.

Important Information:

- All volunteers must have, boots with a heel and wear long pants.

All volunteers must shadow a Head of the Herd for 5 hours for evaluation and approval of volunteer status before being granted Team hours

- **We ask that you provide 24 hours notice for any time which will be missed**, so that we can plan accordingly. This horse relies on us for all care. A no show will lose volunteer privileges.
- **RSHR is a 501c3 non for profit organization.**

Release:

I/We _____, parent(s) or legal guardian(s) of _____ (child), by enrolling my/our child in Moonlight Farm Corp, Riding Program,/RSHR certify that I/we are cognizant of General Statutes of Connecticut Title 52. Civil Actions Chapter 926. Statute of Limitations Conn. Gen.Stat.s52-577p (1994). Assumption of risk by person engaged in recreational equestrian activities, when each person engaged in recreational equestrian activities shall assume the risk and legal responsibility for any injury to his person or property arising out of the hazards inherent in equestrian sports, unless the injury was proximately caused by the negligence of the person providing the horse or horses to the individual engaged in recreational equestrian activities or the failure to guard or warn against a dangerous condition, use, structure or activity by the person providing the horse or horses or his agents or employees.

I/We hereby release Moonlight Farm Corp/RSHR. and any staff members affiliated with Moonlight Farm Corp/RSHR. from any responsibility for any occurrence in connection with the Riding Lesson Program, which may result in injury, death, or other damages. I/We further state that I/we are of lawful age and competent to sign this affirmation and release and that by signing I/we understand the terms therein. I/We assume all responsibility for _____ (child)'s physical fitness and capabilities to perform under normal conditions of the Moonlight Farm Corp/RSHR. . In witness whereof I/we have executed this affirmation and release on this _____ day of _____, 2020/2021

Parent or Guardian Signature

Photo Release

I give permission for Moonlight farm/RSHR to use photos including my son/daughter named above for the webpage or other publicity that may involve photos such as the Rising Starr Horse Rescue , blog, newsletter, flyers, brochures etc.

Parent/ guardian signature as approval: _____ Date: _____

Mission Statement

Rising Starr Horse Rescue will save one equine life at a time from cruelty or slaughter. Our program will provide care, training and educate the public to nurture, work together, balance a budget, help the community understand the cruelty of horse slaughter industry and to create solutions to decrease the number of unwanted horses in the United States. RSHR will to bring each rescued horse to optimum health and rehabilitation or be humanly euthanized. Rehabilitated horse will be rehomed to qualified homes, we are a rescue and not a sanctuary. Every horse deserves a fighting chance!