



P.O. BOX 777 * CANTONMENT, FL. 32533

VOLUNTEER APPLICATION

Name _____
Street Address _____
City, State, Zip _____
Phone _____ Alternate Phone _____
Email Address _____

Please check any services that you can offer:

- Transporting horses
- Fund Raising Committee
- Training
- Labor (carpentry, fencing projects, etc.)
- Grooming, Cleaning Stalls
- Grant Writing
- Other _____

Liability Waiver: I, the undersigned, have read and understand the following:
Warning, under Florida Statute 773.02, an equine activity sponsor or equine professional, or any other person, which shall include a corporation shall not be liable for an injury to or the death of a participant in equine activities resulting from the inherent risks of equine activities.

Signature

Date

Legal Guardian (if under 18 years of age)

Date

