



Ivy Hill Therapeutic Equestrian Center

Potential Volunteer

Location/Mailing Address:
1811 Mill Road Perkasio, PA 18944

Thank you for your interest in lending a hand with Ivy Hill Therapeutic Equestrian Center. We are actively seeking volunteers to help with lessons, horses, fundraising, and other organizational tasks. You do not need to have any experience with horses to help out. We will provide the necessary training for you to be a growing part of our organization. We provide services all year round to most of our clients. We ask that you try and commit to volunteering on a regular basis so our riders and staff have as much consistency as possible. We will also take "subs" incase someone is unable to make a scheduled time.

Volunteers are assigned a time frame and unless you are physically unable to help in the barn you will be asked or expected to chip in. We would like everyone to help in other areas if the lesson does not show or is canceled. Please see barn staff if you have a break in lessons or if lessons are canceled. If barn staff does not have anything they need help with to finish daily chores, there is a list of extra tasks that can be done. In inclement weather (too hot or too cold) if lessons are canceled we will still need volunteers to assist in the barn during certain times. We would love the help if you are able. Since the barn and the horses must still be cared for daily, we welcome your assistance to make the inclement weather days go by faster.

Barn Volunteer Hours on inclement weather days are:

Monday-Sunday 7:30-9:30am
Monday-Friday 3:00-5:00pm
Saturday- Sunday 2:00-4:00pm

Our mission is to provide the highest quality services to the individuals who can benefit from the programs we offer. Our staff members have degrees in areas of Special Education, Physical Therapy, and Psychology, with additional specialized training and certification in Therapeutic Riding and Hippotherapy. Our goal is to allow individuals to succeed and miracles happen! We have many individuals of all ages that have "special challenges" ranging from those with physical, intellectual, emotional, and social needs, along with those who have suffered from a trauma or are recovering from injury. We work with individuals and their families to provide the best services possible. All your help is great appreciated in enriching the lives of others through horses and humans.

For more information please contact Ivy Hill at 215-822-2515 ext 4 (barn number) or email ivyhillvolunteer@gmail.com .

Sincerely,
Ivy Hill Staff

Ivy Hill Equestrian

Location/Mailing: 1811 Mill Road, Perkasio PA 18944
215-822-2515 ext. 4

Volunteer Registration:

Name _____ Home Phone _____
Address _____ Work Phone _____
City/State/Zip _____ Cell Phone _____

E-mail _____ D.O.B _____
How did u learn about Ivy Hill? _____

Parent of Legal Guardian Name: _____
Parent of Legal Guardian Phone Number: _____

Employer/School: _____

If employed does your employer match donations given to non-profits? YES NO

If employed does your employer require volunteer hours/service projects? YES NO

If attending school are you doing this for service hours or class requirements? YES NO

Please check the areas you may be interested in:

Stable Volunteer

- _____ Leading a horse in a lesson- horse handling
- _____ Side walking with a student
- _____ Grooming/ tacking a horse for a lesson
- _____ Stable chores/ Horse care (feedings)
- _____ Facility Maintenance (mowing, weed wacking, etc.)
- _____ Cleaning

Special Events

- _____ Special Olympics (separate paperwork)
- _____ Horse Shows

Administrative

- _____ Public Relations (community outreach)
- _____ Fundraising
- _____ Volunteer Recruitment
- _____ Photography/Video
- _____ Board Member
- _____ Committee Member
- _____ Budget and Finance
- _____ Future planning
- _____ Newsletter
- _____ Office work (mailings/filing)
- _____ OTHER: _____

Do you have access to any services that may be helpful to Ivy Hill?

Please list occupation in other if it may be beneficial. (Examples: OT, PT, school psychologist)

- _____ Printing, Marketing Materials
- _____ Computer Programming, Equipment (Please List: _____)
- _____ Building Materials/Construction (Please List: _____)
- _____ Electrical/Plumbing (Please List: _____)
- _____ Horse Feed/Riding Equipment
- _____ Medical Professional (please specify _____)
- _____ Other (Please specify): _____

Are you certified in CPR training? _____ Date expires _____
Are you certified in First Aid? _____ Date expires _____

IVY HILL THERAPEUTIC EQUESTRIAN CENTER

Location/ Mailing: 1811 Mill Rd, Perkasie, Pennsylvania 18944

Authorization for Emergency Medical Treatment Form

Name: _____ DOB: _____ Phone: _____

Address: _____

Physician's Name: _____ Preferred Medical Facility: _____

Health Insurance Company: _____ Policy #: _____

Health History:

Last Tetanus Shot: Date _____ TB Test: Positive ____ Negative ____ Date _____

Current Medications: _____

Allergies to medications: _____

Please describe your health status (physical and emotional demands of working in an equine assisted program. Address fitness, cardiac, respiratory, bone or joint function, recent hospitalizations/surgeries or lifestyle changes that may be imperative for us to know while you are volunteering at Ivy Hill.

In the event of an emergency, contact:

Name: _____ Relation: _____ Phone: _____

Name: _____ Relation: _____ Phone: _____

Consent Plan

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 _____ 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.

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

Date: _____ Consent Signature: _____

Client, Parent or Legal Guardian

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.

- Parent or legal guardian will remain on site at all times during equine assisted activities
- In the event emergency treatment/aid is required, I wish the following procedure to take place:

Date: _____ Consent Signature: _____

Client, Parent or Legal Guardian

Confidentiality Release

Ivy Hill shall preserve and respect the right of confidentiality for all individuals in our therapeutic riding program. The volunteers and staff must keep confidential any and all medical, social, referral, person, and financial information regarding individuals and their families in our program.

I, _____, understand and agree to abide by the confidentiality policy of Ivy Hill.

Print name of Volunteer _____ **Signature** of Volunteer: _____

If volunteer is under 18 years of age print name of Parent/Guardian: _____

Signature of Parent/Guardian: _____ Date _____

Liability Release Form

_____ (participant’s name) would like to participate in the Therapeutic Horseback Riding programs offered by Ivy Hill Equestrian of Ivy Hill Foundation, Inc. By signing this form, I acknowledge the potential risks of injury or death from interacting with and riding horses. I hereby, intending to be legally bound, for myself, my heirs, executor or administrators, waive and release all claims for damages I may have against Ivy Hill Foundation, Inc., its Board of Trustees, Instructors, Therapists, Aides, Volunteers and/or Employees, and its hosting facility, and it’s owners and associates for any and all injuries, and/or losses I/my son/daughter/ward may sustain while participating at Ivy Hill.

Print name of Volunteer _____ **Signature** of Volunteer: _____

If volunteer is under 18 years of age print name of Parent/Guardian: _____

Signature of Parent/Guardian: _____ Date _____

Photo and Media Release – OPTIONAL

I hereby

- consent
- do not consent

to and authorize the use and reproduction by Ivy Hill Foundation, Inc. and Ivy Hill Equestrian of any and all photographs and any other audiovisual and printed materials of me (or my son/daughter/ward if participant is under 18 years of age) for the promotional and educational activities or other uses for the benefit of the programs at Ivy Hill.

Print name of Volunteer _____ **Signature** of Volunteer: _____

If Volunteer is under 18 years of age print name of Parent/Guardian: _____

Signature of Parent/Guardian: _____ Date _____

Background Information

.Have you ever been charged with or convicted of a crime? Yes _____ No _____

Please explain if yes: _____

I _____ authorize _____ to revive information from any law enforcement agency, including police departments and sheriff’s departments, of this state or any other state or federal government, to the extent permitted by state and federal law, pertaining to any convictions I may have had for violations of state and federal criminal laws, including but not limited to convictions for crimes committed upon children or animals.

I understand that such access is for the purpose of considering my application as an employee/volunteer, and I expressly do NOT authorize Ivy Hill, its directors, officers, employees, or other volunteers to disseminate this information in any way to any other individual, group, agency, organization, or corporation.

Signature of Volunteer: _____

Date _____

Whistleblower Policy

No individual who reports or complains about harassment or violation of Code of Conduct, or who assists the Company in an investigation of harassment, or violation of the Code of Conduct will be subject to retaliation. Any volunteer who has witnessed or experiences behavior believed to be retaliation or any volunteer aware of such behavior, has a responsibility to report the behavior immediately to a supervisor, Management Team member, or Chief Executive Officer/executive Director. Ivy Hill will not tolerate any effort to avoid, hinder or corrupt the complaint or investigation process, including refusal to cooperate with an investigation or knowingly making false statements to Management the Chief Executive Officer/Executive Director or the Board during the complaint or investigation process. Such actions may result in employment actions up to and including termination of employment.

Facility Rules

1. This is a private facility – no one is permitted on premises without a staff member or representative from Ivy Hill.
2. Please do not hand-feed the horses - it can encourage biting.
If you want to feed a treat, please ask permission from a staff person first, and place the treat in the horse's feed bucket.
3. Use quiet voices and walk in the barn.
Loud noises and sudden fast movements can startle horses
4. All children must be supervised at all times.
5. Please be respectful during - in the barn or in the riding rings.
Please keep noise to a minimum and please do not interrupt sessions.
6. All ring gates are to remain closed during riding sessions.
7. No spectators in the ring during a lesson, unless given permission by the instructor.
8. All pets must be leashed or remain in your car. Service dogs are permitted in the facility. (This is for the safety of our riders and horses!)
9. No Smoking on the property.
10. Clean up after yourself – this includes trash, brushes, tack, blankets, sweeping up after grooming, manure, etc.
11. Do not handle any horse with out permission first.
12. Do not leave horses unattended on crossties.
13. All horses must be led with a lead rope.
14. No one in the office without permission of a staff person- please use observation room or volunteer lounge for breaks and to store belongings

These rules and guidelines are for everyone's safety!
We appreciate your cooperation and understanding.

Name: _____

Date: _____

Volunteer/ Intern Past Experience:

Do you have experience training or working with horses? ____ Yes ____ No

If yes, please provide contact information for the most recent Equine Program/Center you have worked or volunteered with:

Name of Equine Program Center: _____

Contact Name: _____

Position: _____

Mailing Address: _____

Daytime Phone #: _____

E-mail: _____

Please list your horse experience:

Are you able to walk for 45 minutes and job short distances? ____ Yes ____ No

Do you have experience or training working with people with disabilities? ____ Yes ____ No

If yes, please provide contact information for the most recent youth program/center you have volunteered with:

Name of Program or Center: _____

Contact Name: _____

Position: _____

City: _____ State: _____

Daytime Phone #: _____

E-mail: _____

Please describe your experience:

Have you volunteered with any other youth organizations in the past? ____ Yes ____ No

If yes, please list the name of the organizations and your volunteer position:

Organization: Position Held: Length of Time:

Volunteer Self Skills Assessment:

Ivy Hill is a busy facility with many different volunteer duties and responsibilities for volunteers. The following is a list of some of the tasks that you may be asked to perform, based on your volunteer position. Please place a check mark next to each task and your experience level with each task.

	Have experience and am comfortable with task:	Very little experience, but willing to learn:	I have no interest in this task:
Hay Crew/Barn Help:			
Cleaning Stalls			
Cleaning and Organizing Tack			
Loading/Moving Hay			
Feeding Horses			
Horse Handling:			
Bathing Horses			
Grooming Horses			
Picking Hooves			
Leading Horses			
Riding Horses			
Lunging Horses			
Conditioning Horses			
Horse Training			
Lessons:			
Leading in Lessons			
Side walking in Lessons			
Working with Children			
Working with Adults			
Working with Special Needs			
Instructing Lessons			
Emergency Dismount			
Admin/Special Events:			
Answering Phones			
Data Entry			
Copying/Faxing			
Filing and Organizing Paperwork			
Computer Programming/Network			
Assist with Special Events/Fundraisers			
Other skills not listed: (carpentry, plumbing, electrical, sewing/costume design, event planning, camp experience.			

Volunteer Check List for Training:

Red Pin:

-Barn and maintenance volunteers.

*****All volunteers 12 or 13 and any other volunteer regardless of age who wants too or needs experience. Does not get a 2 or a 3 on grading scale. *****

- Able to clean out a stall
- Able to do basic cleaning of the facility
- May not get horse out unless staff is directly assisting. (ex: taking another horse out to the field or instructor may lead another horse to same field, or do gates and volunteer may lead, but are not allowed to handle draft horses.)

Blue Pin:

-Side aid only. Must be able to complete tasks of a blue/red pin volunteer.

*****Any Volunteer who passes side aid grading scale with 2 or 2 over age 14*****

- Halter Horse
- Get horse out of stall and put on cross ties
- Groom and tack a horse
 - correct order
 - correct motions
 - pick feet of 3 different horses
- Be able to demonstrate
 - Arm Lock- Thigh hold
 - Double arm lock- thigh and calf
 - Spotter
- Able to walk at a moderate pace for 30 minutes
- Able to trot/jog 2 long sides maintaining appropriate position next to horse
- Should know how to handle emergency situations. (Emergency dismount)
- Assist with off side mounting

Green Pin:

-Lessons and barn (supervision needed). Must be able to complete tasks of a green/blue/red pin volunteer.

*****Any volunteer who is over 14. Who gets a 2 or 3 on grading scale*****

- Halter horse
- Lead horse in and out of stall to cross ties
- Groom independently
 - correct order
 - correct motions
 - pick feet of 3 different horses
- Tack with minimal assistance
 - English
 - Bridle
 - Soft ride
 - Australian /El Companero
- Independently lead lesson horses
 - Standing in correct spot
 - Know how and when to correct a horse when leading if too fast too slow or being mouthy
- Can keep horses relatively still during standing activities (including mounting and dismounting)
 - Can square horse in ramp
- Lead horse at the walk for 30 minutes
- Lead horse at the and trot one time around the ring.
 - Trotting in hand in appropriate position
- Know basic horse safety and behavior.

*****can bring horses in/out of fields with a staff member present*****

Yellow Pin:

Anything, lessons/barn/leader/sidewalker. (no supervision needed). Must be able to complete tasks of a blue/red/green/yellow pin volunteer.

*****Any volunteer over age 16. That gets a 3 in most areas on grading scale *****

- Bring horses in/out to the field independently.
 - Knows to turn horses head to gate
 - Leads one horse at a time and can prevent from eating grass or pulling on walk out
- Independently lead/sidewalk in a lesson.
 - Can handle any horse in lesson

Anything - Lessons/barn/leader/sidewalker (no supervision needed)
Lessons and barn (supervision needed)
Barn only and maintenance and office (non lesson volunteers, supervised by a staff member)
Side aid only

Grading Scale for Volunteer Trainings

Name of Volunteer: _____ Age: _____

Date of Volunteer Training: _____

Prior Horse Experience: yes no

Prior Experience with Individuals with Disabilities: yes no

0- Not able to perform

1- Very Nervous and hesitant, needs improvement

2- Able to perform but not comfortable. (Satisfactory w/ some horses/riders.)

3- Excels with precise on any horse/rider

Side Aid in Lesson Training

1. Haltering horse	0	1	2	3
2. Getting horse out of stall	0	1	2	3
3. Putting horse on crossties	0	1	2	3
4. Grooming horse	0	1	2	3
5. Tacking up English Saddle	0	1	2	3
6. Tacking up Soft Saddle	0	1	2	3
7. Bridling Horse	0	1	2	3
8. Offside when mounting	0	1	2	3
9. Arm over thigh, thigh hold, or arm bar	0	1	2	3
10. Calf Hold	0	1	2	3
11. Ankle Hold	0	1	2	3
12. Trotting with calf, ankle, thigh hold	0	1	2	3
13. Walking next to horse and rider	0	1	2	3
14. Confidence	0	1	2	3

Blue Pin: 12/14 “2’s” or “3’s” and no “0’s”

Green Pin: 14/14 in” 2’s” or “3’s”, no 0’s or 1’s.

Yellow Pin: 12/14 in 3’s

Leading in Lesson Training

1. Haltering horse	0	1	2	3
2. Getting horse out of stall	0	1	2	3
3. Putting horse on crossties	0	1	2	3
4. Grooming horse	0	1	2	3
5. Tacking up English Saddle	0	1	2	3
6. Tacking up Soft Saddle	0	1	2	3
7. Bridling Horse	0	1	2	3
8. Leading horse in arena	0	1	2	3
9. Bringing horse in mounting ramp	0	1	2	3
10. Holding horse still in mounting ramp	0	1	2	3
11. Safely exiting mounting ramp after rider mounts	0	1	2	3
12. Walking horse in hand around arena	0	1	2	3
13. Circling cones	0	1	2	3
14. Stop/starts	0	1	2	3
15. 20 meter circles	0	1	2	3
16. Full ring figure 8	0	1	2	3
17. Trotting long sides	0	1	2	3
18. Dismounting to ramp or to middle of arena	0	1	2	3
19. Safely exiting the arena back into the barn	0	1	2	3
20. Confidence	0	1	2	3
21. Horse awareness	0	1	2	3

Blue Pin: Did not get 18/21 "2's" or "3's"

Green Pin: 18/21 "2's" or "3's"

Yellow Pin: 18/21 "3's"