



15360 James Madison Pkwy
King George, VA 22485

Submit completed application to:
Email: info@valorranch.us

VOLUNTEER APPLICATION

Section I: Personal Information

Full Name: (Last, First, Middle)		Date:	
Other Names Used: (Maiden, prior marriage, etc.)		Date of Birth:	
Address			
City, State, Zip			
Home Phone:		Cell Phone:	
Email Address:			
Employer: (Name Address, Phone)		Occupation:	

Section II: Emergency Contact Information

Contact Name:		Relationship:	
Phone:		Cell Phone:	
Address:			
City, State, Zip			
Physician		Phone:	

Section III: Education/Experience

Last Grade Completed: (High School)		College:	
Degree/Trade Licenses/Certifications			

Section IV: Interest (please check the areas that you're interested in volunteering)

<input type="checkbox"/> Administration (general office assistance)	<input type="checkbox"/> Maintenance (electrical, plumbing, and fencing repairs, etc.)
<input type="checkbox"/> Barn chores (feeding/watering, grooming, leading, cleaning stalls)	<input type="checkbox"/> Transportation (drive guest to/from ranch)
<input type="checkbox"/> Farm operations (landscaping, gardening, mowing, etc.)	<input type="checkbox"/> Equine care/training
<input type="checkbox"/> Equine Therapy	<input type="checkbox"/> Public relations& marketing (graphic design print/digital)
<input type="checkbox"/> Equine training team (requires extensive experience)	<input type="checkbox"/> Meals (preparing/serving)
<input type="checkbox"/> Firearms/archery instructor/RSO	<input type="checkbox"/> Housekeeping (cleaning cabins/wagons/bathhouse)
<input type="checkbox"/> Special event helper (setup, load/unloaded, trash, etc.)	<input type="checkbox"/> Excursions (Kayaking, fishing, boating)
<input type="checkbox"/> Medic/EMT	<input type="checkbox"/> Fundraising
<input type="checkbox"/> Veteran counseling (PTSD, TBI, etc.)	<input type="checkbox"/> Grant team (researching opportunities, drafting applications)
	<input type="checkbox"/> Veterinary/ farrier services

