



whisperinghoperanch
FOUNDATION

Prospective Volunteer Guide



"Snowflakes melt alone - but together they can be traffic stoppers!"

Teamwork allows common people to attain uncommon results.

Some people want it to happen, some wish it to happen, others make it happen.

Volunteers aren't paid, not because they are worthless, but because they are priceless."

- Anonymous

Volunteer Opportunities

All training will be provided as needed.

CAMPS & RETREATS

Arts & Crafts – Assist where needed with arts & crafts activities. Must be patient and sensitive to the needs of our special guests. A healthy imagination and creativity are helpful.

Recreation & Movement – Help facilitate games such as basketball, soccer, volleyball, and lawn games. Requires physical ability and energy to participate in coaching and playing. Must have patience and enjoy working with people.

Arena Riding – Help facilitate riding for guests by serving as a side walker or horse lead. Requires physical strength to support riders. Must have experience working with horses and patience.

Nature Guide – Guide guests on a nature walk while sharing fun facts about the flora, fauna and insects that inhabit the area. Must enjoy working with people and be comfortable speaking in front of guests. Having related knowledge is a plus.

Ceremonies & Performances – Assist with and/or participate in skits, puppet shows, or other on-stage activities. Must enjoy working with people and be comfortable on stage in front of guests.

Campfire Activities – Share your musical talents with our guests by leading campfire songs. Must be able to sing or play a musical instrument.

RANCH FACILITIES & GROUNDS MAINTENANCE

Animal Care – Help to provide safe, clean and healthy environments for our animal residents by cleaning habitats and interacting with them. Must enjoy working outdoors with animals.

Construction/Maintenance – Help maintain and improve the Ranch property by sharing your basic carpentry, electrical or plumbing skills. Experience working in above areas a plus, but not necessary.

Landscaping/Clean Up – Help keep the ranch grounds safe and beautiful by assisting with basic landscaping duties such as raking, planting, irrigation and clean up ground fuel for forest fires. Must have physical ability and enjoy working outdoors.

CAMP SERVICES

Clerical – Assist with basic office tasks such as answering phones, filing and mailings in the Scottsdale administrative office. Previous office experience a plus but not required.

Special Events & Fundraisers – Assist with set up/break down, guest check-in, food service, etc. No experience necessary.

Photography – Capture the essence of the Ranch in photos during camps, retreats and special events. Must have camera (digital preferred).

If you are interested in one of the areas above, or have ideas about other ways to contribute your time and talents to Whispering Hope Ranch, please complete and return the following application/releases. We look forward to hearing from you!

Whispering Hope Ranch Foundation

10000 N. Scottsdale Rd.

Scottsdale, AZ 85258

Phone: (602) 266 2216

Fax: (602) 266 2219

Email: whrf@whisperinghoperanch.org



whisperinghope
ranch
FOUNDATION

Volunteer Application
Administrative Office
PO Box 54070
Phoenix, AZ 85078
P (602) 266-2216 F (602) 266-2219

Last Name _____ First Name _____ MI _____

Social Security Number _____ - _____ - _____ Birth Date _____ Gender (M) ___ (F)___

Drivers License Number _____ State _____ Exp Date _____

Current Address	Permanent Address (if different)
Address	Address
City State Zip	City State Zip
Home Phone	Home Phone
Cell Phone	Cell Phone
E-mail	E-mail

Current Employer _____

Supervisor _____ Phone Number _____

Date Employed _____ Position _____

Description of Duties _____

Permission to Contact Company Yes No

Previous Employer _____

Supervisor _____ Phone Number _____

Date Employed _____ Position _____

Description of Duties _____

Permission to Contact Company Yes No

VOLUNTEER EXPERIENCE:

Company/Org _____

Address _____ City _____ State _____ Zip _____

Phone _____ Volunteer Position _____

Supervisor _____ From _____ To _____

Description of Duties _____

Permission to Contact Company/Org Yes No

Company/Org _____

Address _____ City _____ State _____ Zip _____

Phone _____ Volunteer Position _____

Supervisor _____ From _____ To _____

Description of Duties _____

Permission to Contact Company/Org Yes No

Company/Org _____

Address _____ City _____ State _____ Zip _____

Phone _____ Volunteer Position _____

Supervisor _____ From _____ To _____

Description of Duties _____

Permission to Contact Company/Org Yes No

PERSONAL REFERENCES (3 References Required)

Name _____ Relationship _____

Address _____ City _____ State _____ Zip _____

Phone _____ How long have you known this person? _____

Name _____ Relationship _____

Address _____ City _____ State _____ Zip _____

Phone _____ How long have you known this person? _____

Name _____ Relationship _____

Address _____ City _____ State _____ Zip _____

Phone _____ How long have you known this person? _____

I CERTIFY that the above answers are true and complete to the best of my knowledge. I authorize Whispering Hope Ranch Foundation, to investigate any statement contained in this application as necessary. In the event that I volunteer at Whispering Hope Ranch, I understand that I am required to abide by all rules, regulations and policies pertaining to volunteerism at Whispering Hope Ranch Foundation.

Signature _____ Date _____

VOLUNTEER INTERESTS

Volunteers play a special role at Whispering Hope Ranch. With the help of caring, dedicated people we are able to continually expand and improve our programs, enabling us as a team to touch the lives of so many, both human and animal. Please check the areas you are interested in volunteering and describe your experience in that area or any related special skills that would be beneficial to WHRF camp programs.

Camp Activities

- Arts and crafts Recreation & Movement Arena Riding
 Nature Guide Ceremonies/ Performances Campfire Activities/Musical

Experience _____

Do you have experience interacting with special needs individuals? Yes No

Describe experience _____

Animal Care/Facilities

- Animal Care Landscaping/Clean-up
 Construction/Maintenance

Experience _____

Camp Services

- Clerical Photographer
 Special Events/Fundraisers

Experience _____

Days and times you are available: _____

PHOTO RELEASE

I consent to and authorize the use and reproduction by Whispering Hope Ranch Foundation (“WHRF”) of any and all photographs and any other audio-visual materials taken of me and/or my child(ren)/ward for promotional material, educational activities, exhibitions or for any other use for the benefit of the program. I hereby waive any claim for remuneration for any WHRF of my and/or my child’s(ren’s)/ward’s likeness.

Volunteer Name _____
(please print)

Signature (parent, guardian, if minor(s)) _____ Date _____

Name of Minor(s) if applicable _____
(please print)

(please print)

I DO NOT CONSENT TO THE PHOTO RELEASE.

LIABILITY RELEASE

I hereby request Whispering Hope Ranch Foundation (“WHRF”) to grant me access to the premises and facilities of Whispering Hope Ranch (“WHR”), near Payson, Arizona. In consideration of, and as a condition to WHRF granting me this privilege, I, as an individual and/or as a parent, custodian and/or legal guardian of a minor child(ren) (“child(ren)/ward”), agree that:

1. The privilege of access is granted only to me and my child(ren)/ward;
2. I assume all risks of personal injury and/or injury to property inherent in visiting WHR, which is located in a wilderness area and which houses domesticated and undomesticated animals;
3. I release and hold WHRF and WHR harmless and waive any claim against them for any accident or injury to me and/or my child(ren)/ward and/or our property occurring on WHR premises;
4. I agree to pay all medical expenses incurred for myself and/or my child(ren)/ward arising out of any accident or injury occurring on WHR premises
5. I agree not to file suit or make any claim against WHR and/or WHRF.
6. This release extends to all officers, directors, employees, servants, agents and assigns of WHRF.
7. I agree that this release applies to me, my child(ren)/ward, my family and any others who may want to assert a claim for accident or injury occurring while visiting WHR.
8. I am aware of the inherent risks associated with equine activities, and am willing and able to accept full responsibility for my and/or my child’s(ren’s)/ward’s safety and welfare and release WHRF and/or WHR from liability.
9. I agree that Arizona law applies to this consent and it is to be interpreted in favor of releasing WHR and WHRF from liability.

Volunteer Signature: _____ Date: _____

Printed Name: _____

Parent/Guardian/Custodian of: _____

Printed Name(s) Child(ren)/Ward(s)

BACKGROUND INFORMATION

Volunteer applications are considered without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-related medical condition or handicap. **Background checks are conducted on all Whispering Hope Ranch Foundation volunteer applicants. A Request, Authorization, Consent and Release For Background Information form must be signed and returned with this application.**

Have you ever had any license, certificate or employment suspended, revoked, terminated, or adversely affected?
 Yes No

Have you ever been convicted of or charged with a felony or misdemeanor: Yes No

If yes, please explain details in full, including dates, details of offense(s) charged, jurisdiction and disposition of case: _____

FIRST AID AND EMERGENCY MEDICAL TREATMENT

I recognize that there may be occasions where I may be in need of first aid or emergency medical treatment as a result of an accident, illness, or other health condition or injury while volunteering at Whispering Hope Ranch. I, the undersigned, do hereby give permission for Whispering Hope Ranch Foundation and its designated representatives to seek and secure any needed medical attention or treatment for me, including emergency transport and/or hospitalization, if in the representative's opinion such need arises. I give permission for attending physician(s) and other medical personnel to administer any needed medical treatment. This provision will only be invoked if the person below is unable to be reached.

Emergency Contacts

Name _____ Phone Number _____

Alternate Contact Name _____ Phone Number _____

Medical Doctor _____ Phone Number _____

Insurance Information

Carrier _____ Phone Number _____

Policy Holder Name _____ Policy Number _____

Volunteer Signature: _____ Date: _____

Name: _____
(please print)

I DO NOT GIVE MY CONSENT FOR FIRST AID OR EMERGENCY MEDICAL TREATMENT AS A RESULT OF AN ACCIDENT, ILLNESS, OR OTHER HEALTH CONDITION OR INJURY WHILE VOLUNTEERING AT WHISPERING HOPE RANCH.

Non-Consent Signature: _____

Date _____

DISCLOSURE

Due to the special population served at Whispering Hope Ranch and as part of our volunteer application process, WHRF may obtain background reports from and prepared by IntelliCorp. The report may consist of contacting all listed prior employers and volunteer organizations to verify your employment and volunteer history. It may also include, but not be limited to, criminal history reports and driving history records. Under the provisions of the Fair Credit Reporting Act (15 USC at 1681-1681u) as amended, before we can seek such reports, we must have your written permission to obtain the information. You have the right, upon written request, to a complete and accurate disclosure of the nature and scope of the investigation. You are also entitled to a copy of your *Rights Under the Fair Credit Reporting Act*.

AUTHORIZATION TO RELEASE INFORMATION

I, _____
Last Name
First Name
Middle Name

Current Address

Dates Lived Here

Date of Birth

Other Names Used (including maiden name)

Years Used

Social Security #

Driver's License #

State Issued

Addresses for the Past Seven Years (include street, city, state, zip code)	Date of Residence
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

do hereby authorize verification of all information in my volunteer application from all sources of employment, education, motor vehicle, criminal history, and personal character or any part thereof, and authorize any duly authorized agent of **IntelliCorp Records, Inc** to obtain, whether the said records are public or private, and including those which may be deemed to be privileged or confidential in nature and I release all persons from liability on account of such disclosures. Information appearing on this Authorization will be used exclusively by **IntelliCorp Records, Inc** for identification purposes and for the release information which will be considered in determining any suitability for volunteerism. I certify that I have made true, correct, and complete answers and statements on my application, any supplements to it in the knowledge that they will be relied upon in considering my application for volunteerism. I agree to provide additional information that may be requested to process my application. I authorize without reservation, any party or agency contacted by **IntelliCorp Records, Inc** to furnish the above-mentioned information. This authorization is valid during the course of my volunteerism to the extent permitted by law.

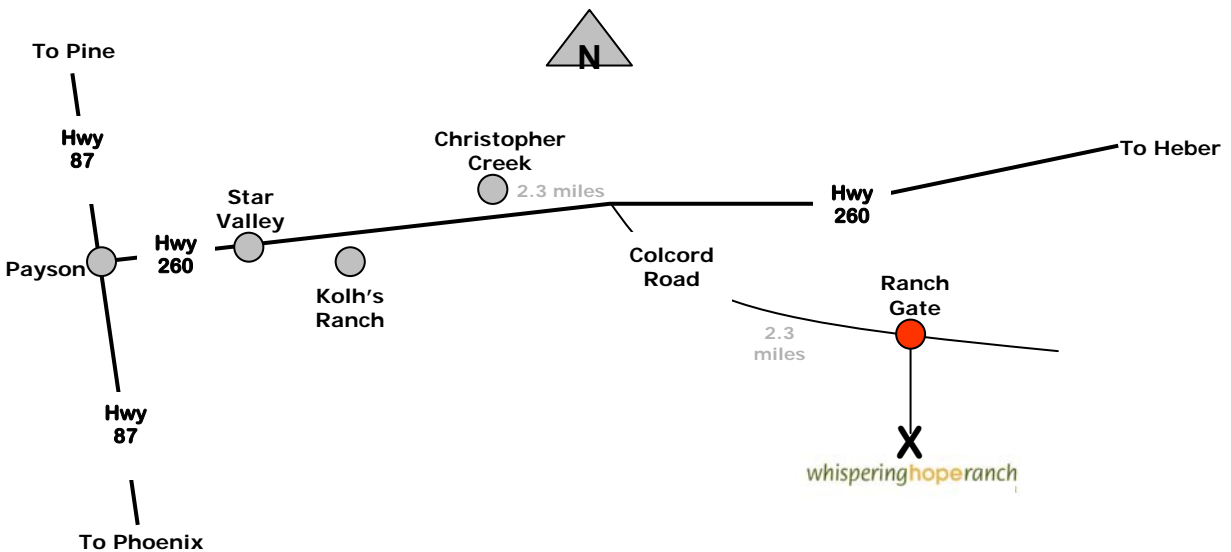
I have the right to make a request to **IntelliCorp Records, Inc**, upon proper identification, to request the nature and substance of all information in its files on me at the time of my request, including sources of information, and the recipients of any reports on me which **IntelliCorp Records, Inc** has previously furnished within the two year period preceding my request. I understand and agree that any omission, false statement, misleading statement, or answer made by me on my application or any supplements to it and in any interviews will be sufficient grounds for rejection of my application.

_____	_____	_____
Printed Name	Applicant Signature	Date

Background Check Completed

_____	_____
Completed by	Date

Driving Directions To Whispering Hope Ranch



From Phoenix Metro Area: Travel north on Hwy 87 to Payson. Turn right (east) on to Hwy 260. Travel approximately 25 miles to Colcord Road (2.3 miles past the second Christopher Creek exit). Turn right onto Colcord Road. Travel 2.3 miles on Colcord Road. Turn right into the gate of Whispering Hope Ranch.

From Tucson:

Travel on I-10 West toward Phoenix. Merge onto US-60 East toward Mesa/Globe. Take the AZ101 Loop North, Exit 176B. Take the AZ202 Loop East, Exit 51. Take the AZ87/Country Club Exit 13 toward Payson, approximately 80 miles. After entering Payson, turn right at the main intersection onto Highway 260 East. Travel approximately 25 miles to Colcord Road (2.3 miles past the second Christopher Creek exit). Turn right onto Colcord Road. Travel 2.3 miles on Colcord Road. Turn right into the gate of Whispering Hope Ranch.

From Flagstaff:

Travel south on I-17. Take the AZ260 exit, Exit 287, toward AZ89A toward Cottonwood/Payson. Turn left onto Finley Flats Road/AZ260/AZ279. Continue to follow AZ260 to AZ87 and turn right toward Payson. After entering Payson, turn left onto AZ260 East toward Showlow. Travel approximately 25 miles to Colcord Road (2.3 miles past the second Christopher Creek exit). Turn right onto Colcord Road. Travel 2.3 miles on Colcord Road. Turn right into the gate of Whispering Hope Ranch.