THE REAL PROPERTY OF THE REAL		City to Saddle Volunteer Application		
give a child a leg up!				
Name of Applicant:			Date of bin	rth:
Street Address;				
City, State, & Zip Code:				
Email:	Phone #:		Cell Phone #:	
Fax:	Web Site:			
Please indicate by checkmark or descriptionSpecial eventsOffice/administrative tasksboard memberprofessional consultant			Skilled labor (co Exhibits staffing direct assistanc	ke to do for City to Saddle: instruction, maintenance) g/fundraising presentations e with equine and/or youth splain below)
Please expand on your ba				
Please list names and cont	act info for two ref	erences we m	ay contact:	
1		2		
	·····			
Signature				

## **Photo Release (optional):**

I hereby consent to and authorize the use and reproduction by City to Saddle and associated organizations of any and all photographs taken of me for promotional printed materials, educational activities, websites, exhibitions, or for any other use for the benefit of City to Saddle.

Signature:

\_\_\_\_\_ (parent/legal guardian if under age 18) Date\_\_\_\_\_

## **PLEASE NOTE:** Please include a signed waiver of liability form for City to Saddle along with this application.

## Signed Waiver of Liability form

Send to:

City to Saddle/Barbara Zenker 4345 Manning Lane Dallas, TX 75220 citytosaddle@gmail.com

Since its inception, City to Saddle has been committed to a singe mission: giving a child a leg up. Since the beginning we have engaged with a diverse youth population, recognizing the incredible value equine relationships can hold for children of all backgrounds when barriers to access are removed. We are making an effort to purposefully engage with the communities we serve to better understand how we can meet their needs. As we continue to grow and develop our non-profit organization, we want, and need, to hear from you.

email to: <u>citytosaddle@gmail.com</u>