



2025 S.T.A.R.S. Volunteer Registration Adaptive Riding for People with Disabilities



OFFICE USE Session 1 – 2 – 3
 T-shirt Received

Volunteer's Name:	Date of Birth:	Sex:
Address:	City, State, Zip:	
Phone:	Email:	
Guardian if under 18:	Relationship to Rider:	
Guardian Phone:	Guardian Email:	
How did you hear about STARS?		
Do you have any of the following: (check all that apply) <input type="checkbox"/> First Aid Certification <input type="checkbox"/> CPR Certification <input type="checkbox"/> Horse Experience (Please explain): _____ <input type="checkbox"/> Experience with people with disabilities (please explain): _____		

Medical Emergency & Release

Emergency Contact: _____ Phone: _____

General Physician: _____ Clinic _____

In the event emergency, I hereby give permission for S.T.A.R.S. staff or assigned volunteers to secure medical treatment including x-ray, surgery, hospitalization, medication, and transportation if needed.

Signed (*guardian or adult volunteer*) _____ Date _____

Photo and Publicity Release

I hereby consent to and authorize the use and reproduction by STARS of all photographs and other audio/visual materials taken for promotional material including printed, social media, website, exhibitions, fundraising and educational activities, grant applications or any other use for the benefit of the program.

Signed (*guardian or adult volunteer*) _____ Date _____

Liability Release

Volunteers shall be 16 years or older. If a volunteer is under 16, the volunteer must have guardian supervision at all times. I would like to volunteer in the S.T.A.R.S. program. I acknowledge the risks and potential for risks of a horseback riding program. I hereby, intending to be legally bound, for myself, my heirs and assignees, executors, or administrators, waive and release forever all claims for damages against S.T.A.R.S., its board of directors, instructors, therapists, volunteers and/or employees for all injuries and/or losses I may sustain while participating in S.T.A.R.S. activities.

Signed (*guardian or adult volunteer*) _____ Date _____

WARNING: Under South Dakota law, and equine professional is not liable for an injury to or the death of a participant in equine activities resulting from the inherent risks of equine activities, pursuant to 42-11-2.

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Session Availability: Select session(s) you plan to help

____ **Orientation May 27** *(same content both orientation sessions; attend either 1 or both)*
____ **Orientation May 29**
____ **Session #1** **June 5, 10, 12, 17, 19, 24, 26, July 1**
____ **Session #2** **July 8, 10, 15, 17, 22, 24**
____ **Session #3** **August 5, 7, 12, 14, 19, 21, 26, 28**

Select T-Shirt Size: ____ **No shirt** ____ **Child's Sm** ____ **Child's Med** ____ **Child's Lg**
____ **Adult Sm** ____ **Adult Med** ____ **Adult Lg** ____ **Adult XLg** ____ **2XLg** ____ **3XLg**
An optional \$10 donation would cover the cost of your shirt.

- Volunteers must not have a record of domestic or sexual violence. Background check must be included with registration. This may be obtained for free from any South Dakota Clerk of Courts office.
- Please wear your STARS t-shirt to all STARS events. Any color/year t-shirt is acceptable.
- Long pants are required.
- Riding boots are preferred if working in horse areas. Closed toe and heel shoes are required.
- Volunteers are most needed during 5:30-7:30 ride times. Volunteers may help catch & groom horses beginning at 4:30. Volunteers may help untack and lead horses to pasture after rides are completed and all riders have exited the arena.
- Photographs that include STARS riders are not permitted.
- Opportunities for volunteers to ride are not guaranteed but occasionally may be available.

Check areas of interest regardless of experience (check all that apply)

- Catching, grooming, tacking up horses prior to session
- Check in of participants & volunteers
- Aiding in boots/helmet fitting for participants
- Escorting participants to/from arena
- Assisting participants with horse interactions from ground (grooming, leading, other activities like painting)
- Assisting riders mounting/dismounting; using lift & mounting platforms
- Assisting mounting/dismounting from offside platform
- Leading horses
- Sidewalking with riders
- Untacking, grooming and returning horses to pasture after sessions

- Helping recruit volunteers
- Help at fundraising events
- Help plan fundraising opportunities
- Help with grant writing
- Help with public relations (photography, press release, news stories, social media)

Return completed forms to STARS Director PO Box 974 Brookings, SD 57006

Any questions may be directed to: Brookingsstars.director@gmail.com