

**Please Read Carefully and Print Clearly.**

**Please print these forms double sided if possible.**

**(This page should only be printed if printing double sided.)**



101 Rodeo Dr  
Spring Creek, PA 16436  
Phone (814) 664-7673  
Fax (814) 664-4669  
mmrcamp@mmrm.org

[www.miraclemountainranch.com](http://www.miraclemountainranch.com)

Dear Volunteer Applicant,

Thank you for your interest in volunteering here at Miracle Mountain Ranch (MMR). We are grateful for individuals, such as you, who are ready and willing to assist in the ministry of MMR. Enclosed you will find an application with a brief description of each position, medical release and horse liability form. Please completely fill out all forms and return them, along with a \$5.00 application fee (**please send a separate payment (check) from other registration fees**). Volunteers are accepted on a first come first serve basis.

The primary purpose of MMR's youth volunteer program is to develop healthy work habits while instilling Christ like character into the everyday lives of young people. We also hope to nurture these youth and develop them into becoming our next wranglers, barn staff, and counselors. Volunteers must be 14 years of age or older. Each group of volunteers meets daily for a bible study and devotions. The period of service for first time volunteers is determined on a week to week basis by the supervisor. Each volunteer will be evaluated on the basis of his or her desire and willingness to serve.

Below is a short description of each area and its responsibilities. You may specify your area of interests on the attached application; availability is on a first come first serve basis so it is advised to select more than one area.

**Rangemaids:**

Range maids help in the kitchen, housekeeping or landscaping. **Kitchen** volunteers assist in food preparation, serving, and clean up after meals. **Housekeeping** participates in the cleaning of the facilities. **Landscaping** includes moving rocks and plants, pulling weeds, laying railroad ties, and other special landscape projects. Rangemaids are housed with kitchen & housekeeping together with a counselor and landscaping with program staff and a counselor. Guys may apply for these areas and would be housed with ranch hands.

**Ranch Hand:**

Ranch hands assist in the following areas: **Grounds**, which includes the care and upkeep of lawns, trash removal, and minor maintenance. **Farming**, assist with bringing in hay, trimming fence rows and minor equipment work. **Construction** (must be 16 yrs or older), assist with construction projects; work could include concrete, masonry, framing, electrical, plumbing, roofing, etc. All ranch hands may also assist in chapel or dining hall set up and bringing in hay if help is needed in these areas. Ranch hands are housed together with a counselor. Gals interested in this area may also apply and would be housed with the program staff and their counselor.

Summer weeks run from Sunday afternoon through Friday evening or Saturday noon depending on area. The average workday is 9 hours long. Pool and trail ride privileges are available to each volunteer according to their work schedule. All volunteers are required to attend chapel services. Volunteers are not allowed to leave the premises unless accompanied by a parent / guardian or supervisor. For further information on a specific area please contact us at (814) 664-7673 or mmrcamp@mmrm.org.

In Christ,

Rachel Mozeika  
Volunteer Registrar, MMRM

**Attention**

**MMR Volunteer Application Form**

(Please include a \$5.00 application fee)

Please attach a recent photo of yourself so we may get to know you better.

Date: \_\_\_ / \_\_\_ / \_\_\_

Name: \_\_\_\_\_ Age: \_\_\_ Date of Birth: \_\_\_ / \_\_\_ / \_\_\_

Address: \_\_\_\_\_ Sex: \_\_\_ SS#: \_\_\_\_\_ - -

City: \_\_\_\_\_ State: \_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone: ( \_\_\_ ) - \_\_\_\_\_ Volunteers E-mail: \_\_\_\_\_

Parent or Guardian: \_\_\_\_\_ E-mail: \_\_\_\_\_

Emergency Phone: ( \_\_\_ ) - \_\_\_\_\_ Cell Phone: ( \_\_\_ ) - \_\_\_\_\_

Church: \_\_\_\_\_ Pastor: \_\_\_\_\_

Please select the position(s) you are applying for with a  for 1<sup>st</sup> and  for 2<sup>nd</sup> choice:

- Kitchen       Housekeeping       Grounds       Farming       Landscaping
- Construction (must be 16 years of age and older due to the nature of their work and OSHA regulations)

If applying for only one position, please mark the weeks you are available in order of your preference with a 1, 2, or 3. If you are interested in more than one position, please use the following codes to designate which weeks you prefer to work in each position. The codes for the jobs are as follows: "C" for Construction, "H" for Housekeeping, "K" for Kitchen, "L" for Landscaping and "G" for Grounds.

Example – 1G means that Grounds is my first choice for the first week I am available.

**\_\_\_ Dates other than summer: \_\_\_\_\_**

- \_\_\_ June 3-9      CHA Clinic
- \_\_\_ June 10-16      Staff Training
- \_\_\_ June 17-23      Wild West 1, Horse Mania, Reining Camp, Horsemanship 1
- \_\_\_ June 24-30      Wild West 2, Marker Madness 1, English 1, Rough Riders 1, Vaulting Camp
- \_\_\_ July 1-7      Wild West 3, English 2, Rough Riders 2, Horsemanship 2, Wilderness Boys
- \_\_\_ July 8/14      Wild West 4, Rough Riders 3, Cowboy Camp, Horsemanship 3, Girls Wilderness
- \_\_\_ July 15-21      Wild West 5, English Jump Start, Frontier Riders
- \_\_\_ July 22-28      Wild West 6, Western Riders 1, English 3, Horsemanship 4, Wilderness Boys 2
- \_\_\_ July 29-Aug 4      Wild West 7, Western Riders 2, English 4, Horsemanship 5, Marker Madness 2
- \_\_\_ August 5-10      Buckaroo Camp A & B

If you are looking to work more than one week please indicate the number of weeks. \_\_\_\_\_

**Personal Commitment**

I have read the accompanying letter / description and am willing to work without any pay as a labor of love to the Lord Jesus Christ in any capacity asked of me. I will do my work promptly and cheerfully to the best of my ability. I also understand as a volunteer I am under the rules and guidelines of a rancher and therefore understand that I am not allowed to leave MMR grounds during stay unless accompanied by parents or guardians.

Signature of Volunteer: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_\_\_



# Miracle Mountain Ranch Liability Release Form

## PLEASE READ CAREFULLY BEFORE SIGNING

This form must be completed by and for each participant of Miracle Mountain Ranch (MMR)  
101 Rodeo Dr. Spring Creek PA 16436 – Phone (814) 664-7673 Fax (814) 664-4669

Name of Participant: \_\_\_\_\_ Date(s) of Participation: \_\_\_\_/\_\_\_\_/\_\_\_\_ - \_\_\_\_/\_\_\_\_/\_\_\_\_

**SERIOUS INJURY MAY RESULT FROM YOUR PARTICIPATION IN THE ACTIVITIES AT MMR. MMR, DOES NOT GUARANTEE YOUR SAFETY. PLEASE WRITE INITIALS BELOW AFTER READING EACH SECTION. PARENTS or GUARDIANS MUST ALSO INITIAL.**

**A. LIABILITY RELEASE -- I AGREE THAT:** In consideration of **MMR** allowing my participation in this activity, under the terms set forth herein, I, the Rancher, for myself and on behalf of my child and/or legal ward, heirs, administrators, personal representatives or assigns, do agree to hold harmless, release, and discharge **MMR**, its owners, agents, employees, officers, directors, representatives, assigns, members, owners of premises and trails, affiliated organizations, insurers, and others acting on its behalf (hereinafter, collectively referred to as “**ASSOCIATES**”), of and from all claims, demands, causes of action and legal liability, whether the same be known or unknown, anticipated or unanticipated; and do further agree I shall bring no claims, demands, action and causes of action, and/or litigation, against **MMR** and/or **ITS ASSOCIATES** as stated above in this clause, for any economic and non-economic losses due to bodily injury, death, property damage, sustained by me and/or my minor child and/or legal ward in relation to the premises and operations of **MMR**  
\_\_\_\_\_/\_\_\_\_

**B. REGISTRATION OF RIDERS/PARTICIPANT, hereinafter known as Rancher, AND AGREEMENT PURPOSE -** I, the above listed individual, and the parent or legal guardians thereof if a minor, do hereby agree to use **MMR** horse, tack and equipment, personnel and trail for the purpose of horseback riding today and on all future dates:  
\_\_\_\_\_/\_\_\_\_

**C. AGREEMENT SCOPE AND TERRITORY AND DEFINITIONS –** This agreement shall be legally binding upon me the registered participant, and the parents or legal guardians thereof if a minor, my heirs, estate, assigns, including all minor children, and personal representatives; and it shall be interpreted according to the laws of the state and county of **MMR’S** physical location. Any dispute by the participant shall be litigated in and venue shall be the county in which **MMR** is physically located. If any clause, phrase or word is in conflict with state law, then that single part is null and void. The term “**HORSE**” herein shall refer to all equine species. The term “**HORSEBACK RIDING**” herein shall refer to riding or otherwise handling of horses, ponies, mules, of donkeys, whether from the ground or mounted. The term “**RANCHER**” shall herein refer to a person who rides a horse mounted or otherwise handles or comes near a horse from the ground. The terms “**I**”, “**ME**”, “**MY**” shall herein refer to the above registered rancher and the parents or legal guardians thereof if a minor  
\_\_\_\_\_/\_\_\_\_

**D. ACTIVITY RISK CLASSIFICATION – I UNDERSTAND THAT:** Horseback riding is classified as RUGGED ADVENTURE RECREATIONAL SPORT ACTIVITY, and that there are numerous obvious and non-obvious inherent risks always present in such activity despite all safety precautions. Related injuries can be severe, requiring more hospital days and resulting in more lasting residual effects than injuries in other activities. I/WE further understand that applicant may be participating in a “**WILDERNESS EXPERIENCE**” and that the meaning of this term is defined as follows: THE PURSUIT OF ADVENTURE TYPE ACTIVITY IN A WILD, RUGGED, AND UNCULTIVATED AREA OR REGION, AS OF FOREST and/or HILLS and/or MOUNTAINS and/or PLAINS and/or WETLANDS, WHICH WOULD LIKELY BE UNINHABITED BY PEOPLE AND INHABITED BY WILD ANIMALS OF MANY TYPES AND SPECIES TO INCLUDE, BUT NOT LIMITED TO, MAMMALS, REPTILES, AND INSECTS, WHICH ARE NOT TAME, MAY BE SAVAGE AND UNPREDICTABLE IN NATURE AND ALSO WANDERING AT THEIR WILL.  
\_\_\_\_\_/\_\_\_\_

**E. NATURE OF STABLE HORSES – I UNDERSTAND THAT:** **MMR** chooses its rental horses for their calm dispositions and sound basic training as is required for use as riding horses for novice and beginner riders, and **MMR** follows a rigid risk reduction program. Yet, no horse is a completely safe horse. Horses are 5 to 15 times larger, 20 to 40 times more powerful, and 3 to 4 times faster than a human. If a Rancher falls from horse to ground it will generally be at a distance of from 3 ½ to 5 ½ feet, and the impact may result in injury to the Rancher. Horseback riding is the only sport where one much smaller, weaker predator animal (human) tries to impose its will on another much larger, stronger prey animal with a mind of its own (horse) and each has a limited understanding of the other. If a horse is frightened or provoked it may divert from its training and act according to its natural survival instincts which may include, but are not limited to; Stopping short; Changing directions or speed at will; Shifting its weight; Bucking, Rearing, Kicking, Biting, or Running from danger.  
\_\_\_\_\_/\_\_\_\_

F. **RANCHER RESPONSIBILITY** – I UNDERSTAND THAT: Upon mounting a horse and taking up the reins the Rancher is in primary control of the horse. The Rancher’s safety largely depends upon his/her ability to carry out simple instructions, and his/her ability to remain balanced aboard the moving animal. I agree that the Rancher shall be responsible for his /her own safety and that of an unborn child if the Rancher is pregnant. **MMR** advises pregnant women not to ride horses, unless permission is given under advice of her physician.

\_\_\_\_/\_\_\_\_

G. **CONDITIONS OF NATURE** – I UNDERSTAND THAT: **MMR** is **NOT** responsible for total or partial acts, occurrences, or elements of nature that can scare a horse, cause it to fall, or react in some other unsafe way. **SOME EXAMPLES ARE:** Thunder, lightning, rain, wind, water, wild and domestic animals, insects, reptiles, which may walk, run, or fly near, or bite or sting a horse or person; and irregular footing on out-of-door groomed or wild land which is subject to constant change in condition according to weather, temperature, and natural and man-made changes in landscape.

\_\_\_\_/\_\_\_\_

H. **CARRY ON OBJECTS AND SHARP NOISES** – I UNDERSTAND THAT: Ranchers must not carry loose items on rides which may fall, blow away, flap in the wind, bounce, or make sharp noises, possibly scaring a horse. **SOME EXAMPLES ARE:** Cameras, hats not securely fastened under chin, toys, and/or purses. Ranchers must not make sharp, loud noises, such as screaming or yelling, which may scare a horse.

\_\_\_\_/\_\_\_\_

I. **SADDLE GIRTHS - NATURAL LOOSENING** – I UNDERSTAND THAT: Saddle girths (saddle fasteners around horse’s belly) may loosen during a ride. If a Rancher notices this he/she must alert the nearest guide or wrangler as quickly as possible so action can be taken to avoid slippage of saddle and a potential fall from the animal.

\_\_\_\_/\_\_\_\_

J. **PROTECTIVE HEADGEAR OFFERING** – All participants in a Miracle Mountain Ranch horse activity must wear a SEI certified helmet in order to participate. I, for myself and on behalf of my child and/or legal ward, have been offered an SEI CERTIFIED ASTM STANDARD F 1163 Equestrian Helmet by **MMR** and do understand that the wearing of such headgear while mounting, riding, dismounting and otherwise being around horses, may prevent or reduce severity of some of the wearer’s head injuries and possibly prevent the wearer’s death from happening as the result of a fall and other occurrences. It is understood that **STABLE-PROVIDED** protective headgear may not be of perfect fit for each Rancher’s head, and that once provided I/WE will be responsible for securing the helmet on this Rancher’s head at all times.

\_\_\_\_/\_\_\_\_

Does this participant have physical and/or mental health conditions, problems, and/or disabilities which may affect his/her safety and ability to ride a horse or participate in any other activities? \_\_\_\_ Yes \_\_\_\_ No

If “yes” describe here: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**All Ranchers and Parents or Legal Guardians must sign below after reading this entire document:**

**SIGNER STATEMENT OF AWARENESS**

II / WE, THE UNDERSIGNED, HAVE READ AND DO UNDERSTAND THE FOREGOING AGREEMENT, WARNINGS, RELEASE AND ASSUMPTION OF RISK. I/WE FURTHER ATTEST THAT ALL FACTS RELATING TO THE APPLICANT’S PHYSICAL CONDITION, EXPERIENCE, AND AGE ARE TRUE AND ACCURATE.

\_\_\_\_\_  
SIGNATURE OF RANCHER (Spouses must sign for themselves.) DATE: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF PARENT, GUARDIAN #1 DATE: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF PARENT, GUARDIAN #2 DATE: \_\_\_\_\_

# Miracle Mountain Ranch Medical Release Form

## PLEASE READ CAREFULLY BEFORE SIGNING

This form must be completed by and for each participant of Miracle Mountain Ranch (MMR)  
101 Rodeo Dr. Spring Creek PA 16436 – Phone (814) 664-7673 Fax (814) 664-4669

WRITE INITIALS BELOW AFTER READING EACH SECTION. PARENTS or GUARDIANS MUST ALSO INITIAL.

Name of Participant: \_\_\_\_\_ Date(s) of Participation: \_\_\_/\_\_\_/\_\_\_ - \_\_\_/\_\_\_/\_\_\_  
Date of Birth (if under 18) \_\_\_/\_\_\_/\_\_\_ Age (if under 18) \_\_\_ Date of Last Tetanus: \_\_\_/\_\_\_/\_\_\_ SS No.: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Name of Parent or Guardian (if under 18): \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Address: \_\_\_\_\_ Work Phone : (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
City: \_\_\_\_\_ ST: \_\_\_ Zip: \_\_\_\_\_ Cell Phone : (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Please list any medications or allergies that participant may have.

Medications: \_\_\_\_\_  
\_\_\_\_\_

Allergies: \_\_\_\_\_  
\_\_\_\_\_

Is the Weight of the Participant over 240 Lbs? If yes please list Weight: \_\_\_\_\_

A. **ACCIDENT/MEDICAL INSURANCE** – I AGREE THAT: Should emergency medical treatment be required, I and/or my own accident / medical insurance company **shall pay** for **ALL** such required expenses. Please complete **ALL** areas, if there is **No** Insurance; please note this under Name of Insurance Company.  
\_\_\_\_\_/\_\_\_\_

Name of Insurance Co: \_\_\_\_\_ ID #: \_\_\_\_\_  
Ins. Co. Address: \_\_\_\_\_ Group #: \_\_\_\_\_  
Ins. Co. Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Employer of Insured: \_\_\_\_\_

B. **MEDIA RELEASE:** I understand that any pictures taken during an **MMR** event, as well as testimonies, of myself or my child and/or legal ward may be used in MMR promotional materials including newsletters, brochures, displays and websites.  
\_\_\_\_\_/\_\_\_\_

C. **MEDICAL RELEASE** -- I certify that this Rancher has my permission to attend **MMR**, and further give consent for medical treatment for the Rancher in the event that a need for immediate medical attention arises. If such need arises, I agree to the release of any records necessary for treatment, referral, billing, and insurance purposes; and give permission for a camp nurse or other staff to inform the necessary parties of the Rancher's medical conditions, including, but not limited to, food or other allergies, asthma, seizures, or medication for attending to the Rancher's medical needs. I understand that some activities are inherently risky, and take responsibility for the Rancher's participation in any of the Ranch's program areas, and indemnify, release, and discharge Miracle Mountain Ranch Missions, Inc. and its directors, officers, employees, and agents from liability and all costs arising from my child's participation in camp activities.  
\_\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF PARTICIPANT / PARENT, GUARDIAN #1 DATE: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF PARENT, GUARDIAN #2 DATE: \_\_\_\_\_