

## RYYR MENTORING PROGRAM INFORMATION PACKET

**PLEASE KEEP THESE TWO PAGES FOR YOUR INFORMATION.**

### PARTICIPATION REQUIREMENTS

**Our session program is open to all children, ages 6-18, who are dealing with life challenges and difficulties (including but not limited to divorce, bullying, loss of a family member, abuse, etc.). The only other "requirement" is that the child wants to come.** RYYR understands that every child deals with his or her own set of unique challenges. Session leaders (mentors) work hard to adapt programming to meet the individual needs of each child.

While we do not wish to turn any child away, there are a limited number of sessions available each summer (June-August). Sessions may be individual or with a small group, depending on the child's needs and prior experience at the ranch. Although we cannot guarantee a session for every child who wants one, RYYR does its best to accommodate as many participants as possible. Our mentors are volunteers, so session space cannot be guaranteed ahead of summer as unexpected situations can change volunteer availability. Application acceptance places your child on the list to be contacted when a mentor is available.

RYYR is not a residential facility and is unable to provide housing for out-of-town visitors.

### SESSION COMPONENTS

RYYR is a faith-based organization, however we do not belong to any particular denomination. **The overall aim of our session program is to love and encourage children which in turn will foster hope and joy.** This process takes on as many unique forms as there are kids. However, there are some choice components that are generally included in each session.

- **Chores:** Almost every child and mentor pair will complete a small chore at the beginning of the session. This time is designed to teach the importance of serving others by giving through the work of your own hands. Often this opportunity empowers children in knowing that their efforts can make a difference to those around them. It also enables mentors to better understand each child each day, and gain perspective for the best use of time to follow.
- **Working with horses:** The majority of children who come to RYYR are drawn to the ranch because of the horses. These kids will learn to correctly handle, groom, lead, ride, and care for horses during their sessions. Again, each session depends on the needs of the child and of the horse on any given day.
- **Fishing:** Some of the children who come to our facility would prefer the challenge of fishing. A mentor will teach the child proper safety and fishing techniques.
- **Crafts:** For those who do not wish to spend time riding horses, the ranch has assembled some wonderful craft options for a child and mentor to use.
- **Woodwork:** Some of our mentors are skilled in carpentry and woodworking. Many kids enjoy time helping to build wood items.
- **Play:** Often, the most valuable time in a child's life is to allow and encourage kids to be kids by playing. Many children choose to spend some entire sessions wholly engaged in playing games including water games and board games.

Sessions can include one or many of the above components, or sometimes something entirely unique. Together, the mentor and child determine the best course of action for each session time. Mentors do their best to listen and creatively respond by using the resources of the ranch to support and encourage children in need.

### RANCH REQUIREMENTS & RULES

- **No open toed shoes can be worn on premises - shoes/boots with closed toes and closed heels are required.** For riding, boots with little or no tread and a heel are recommended - clogs are not acceptable. (We have extras on hand for children to borrow while at the ranch)
- Hats can be worn, however, they should be worn so as to not obscure the eyes.
- **Pants (preferably jeans) must be worn to ride horses.** Jeans should be appropriate rise and not expose any skin. If not riding, shorts are allowed if they are finger-tip length.
- **Please have the child dress modestly,** no cleavage or midriff showing. Tank tops must be 1in wide straps. Underwear/bra parts of any sort are not to be seen.
- Nothing is permitted to be hanging down around the neck or tied around the waist while riding.
- South Western PA weather is a little crazy so please check the forecast and plan appropriately! With our indoor arena we are able to have sessions in rain or heat, but mentors may choose to reschedule as they deem appropriate.
- To promote individual responsibility, we recommend that kids **bring their own water bottle.** Other items we recommend for your child to bring/wear for his or her session include long pants, sunscreen, light jacket if temperatures may drop that day, and a snack, if desired.
- **No profanity is allowed.**
- **Cell phone ringers & notifications are to be turned off and phones kept in pockets unless used for picture taking.**

### INFORMATION FOR PARENTS / GUARDIANS / CARETAKERS

**We would like a child's parent, guardian or approved caretaker to be on the property during their child's session, but it is not required.** Adults and siblings or friends who do not have a session have some options. We hope for this time to be relaxing and enjoyable for all who come. Here are some ideas for that time, as well as some general safety rules:

- Read or sit and enjoy the farm scenery. We can provide fold out chairs, just let us know.
- Seek out a private location on the ranch for quiet reflection and prayer.
- Get plugged in as a Local Volunteer. Ask us for more information.
- Play or be involved with your kids who are not in sessions. Please keep these children with you at all times.
- Watch your children ride during their session. We do ask that you watch from a distance and help us to maintain a one-on-one relationship with your child.
- Taking pictures is permitted and encouraged. Again, we ask parents to use discernment regarding giving space to their child and leader during the session.
- The horses love to welcome visitors. We invite you to meet them over the fence. However, **please do not enter the paddocks or stalls or feed any treats without a RYYR leader present.**

**Our session program has one goal - to mentor the child.** There are many different activities used in sessions to accomplish this. Some of these activities include fishing, crafts, games, chores, woodworking, spending time with a horse and riding. All activities are weather dependent and are chosen at the discretion of the mentor.

**PLEASE KEEP THESE TWO PAGES FOR YOUR INFORMATION. If you have further questions please email [office@ryyr.org](mailto:office@ryyr.org) or call 412-585-0383.**

# RYR MENTORING PROGRAM APPLICATION

## **Parent or Guardian Information**

Name: \_\_\_\_\_  
Relationship to the child: \_\_\_\_\_  
Address: \_\_\_\_\_ City, State & Zip \_\_\_\_\_  
Phone number: \_\_\_\_\_  
Email: \_\_\_\_\_  
Preferred method of contact:  Phone call  Text message  Email

## **Child's/Children's Information**

Name: _____	Name: _____
DOB: _____	DOB: _____
Height: _____ Weight: _____	Height: _____ Weight: _____
Circle: Male / Female	Circle: Male / Female

## **Child's/Children's Health Information/Insurance:**

Allergies (food or other): \_\_\_\_\_  
Any other health conditions or diagnosis: \_\_\_\_\_  
Insurance Co. Name: \_\_\_\_\_ Policy#: \_\_\_\_\_  
Group# \_\_\_\_\_ ID# \_\_\_\_\_ Phone # \_\_\_\_\_

## **Background Information:**

**\*What challenges is your child currently facing? How do you think they can benefit from this program this year?**

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**\*Would you say that your child is currently in crisis? YES / NO**

**\*Has the child ever participated in our program before? YES / NO**

**\*What level of horsemanship knowledge does your child have? None/ Beginner / Intermediate / Experienced**

**\*What religious background and community does your child have, if any?**

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**Please consider selecting the options below that apply to your child's or family's background to help our mentors best know how to support them:**

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> Divorce/ Remarriage       | <input type="checkbox"/> Single-Parent Home | <input type="checkbox"/> Foster care                         | <input type="checkbox"/> Adoption              |
| <input type="checkbox"/> Depression/Anxiety        | <input type="checkbox"/> Bullying           | <input type="checkbox"/> Death                               | <input type="checkbox"/> Chronic health issues |
| <input type="checkbox"/> Homelessness              | <input type="checkbox"/> Addiction          | <input type="checkbox"/> Physical abuse                      | <input type="checkbox"/> Sexual abuse          |
| <input type="checkbox"/> Legal guardianship change |   | <input type="checkbox"/> Lack of food or financial resources |  |
| <input type="checkbox"/> Other: _____              |   |  |  |

**Scheduling Information:**

Summer mentoring at RYYR is currently split into 2 terms: June-mid July & mid July-August. Weekly sessions are 90 minutes long and run for at least 6 weeks (new participants may go up to 8 weeks depending on need). Your child’s RYYR volunteer mentor will contact you prior to the start of the term to arrange dates and times for sessions.

\*If there is not enough availability to schedule all my kids at once, I am open to their sessions being scheduled at different times: YES/NO

\*Who will transport the child to and from sessions? Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

\*Request for term (will be honored if possible - **all RYYR session scheduling depends on the availability of volunteer mentors which may change**):

no preference       1st (June-mid July)       2nd (mid July-August)

\*General availability during summer - **check all that apply:**

Days:  no preference       weekday       Saturday  
Times:  no preference       morning       afternoon       evening

\*Dates your child is NOT available (vacations, band or sports camps, start/end of school year, etc.):  
\_\_\_\_\_

**\*Attendance Policy:**

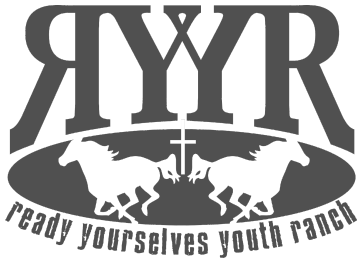
We want session time with the children to be used to its full capacity so we ask that children are on time for their session. **If they are 15 minutes late and/or absent from sessions more than three times they will be asked to leave the program to make room for other children.** Contact their mentor ahead of time if there is a reason for a late arrival. If you must cancel, give us as much notice as possible as mentors have jobs and families and we want to be respectful of the time they are volunteering.      \*\*\* \_\_\_\_\_ **INITIAL HERE**

If you have any questions about the application or program please feel free to contact us.  
You can return this application by email or mail at the addresses below:

**Mailing address:**  
115 Meehan Lane,  
New Brighton, PA 15066

**Facility Location:**  
Meehan Lane  
New Brighton, PA 15066

**Phone & Email:**  
412-585-0383  
office@ryyr.org



## READY YOURSELVES YOUTH RANCH EQUINE ACTIVITY RELEASE, HOLD HARMLESS AGREEMENT AND PHOTO RELEASE

1. I, \_\_\_\_\_, the undersigned, on behalf of myself and/or, as parent and natural guardian of the minor known as \_\_\_\_\_, have read, understand and freely and voluntarily enter into this Release and Hold Harmless Agreement with RYYR understanding that this Release and Hold Harmless Agreement is a waiver of any and all liabilities.

2. I understand the potential dangers that I or my minor child can incur in mounting, riding, walking, boarding, feeding any horse; including but not limited to, interactions with other horses. I understand these risks and I hereby release RYYR, its owners, managers, employees, family, and anyone directly or indirectly connected with RYYR from any liability whatsoever in the event of injury or damage of any nature, including death, to me, or anyone else caused by or incidental to my electing to mount, ride, or interact with horses in any way, on RYYR's premises.

3. I understand and recognize and warrant that this Release and Hold Harmless Agreement, is being voluntarily and intentionally signed and agreed to, and that in signing this Release and Hold Harmless Agreement I know and understand that this Release and Hold Harmless Agreement may further limit the liability of equine professionals in my undertaking in any equine activity whatsoever, including death, personal injury and/or damage to any property.

4. I recognize and agree that I have selected the equine professional(s) I will be working with, and acknowledge that I agree said equine professional(s) has/have made reasonable and prudent efforts to determine my ability to engage in the equine activity, and has/have sufficient knowledge of my equine and horseback riding skills as to relieve, release and hold harmless said equine professional(s) from any continuing duty to monitor my equine activities.

5. I further voluntarily agree and warrant to Release and Hold Harmless these equine professionals from any liability whatsoever, including, but not limited to, any incident caused by or related to said equine professional's negligence, relating to injuries known, unknown, or otherwise not herein disclosed, including, but not limited to, injuries, death or property damage from equipment failure; mounting, riding, jumping; dismounting; walking; grooming; feeding; use of horse barn, electric fencing, paddock, trails or horse arena/ring, in any capacity; falling off horse whether horse is bucking, flipping, spooked, or my failure to understand any equine professional's direction relating to my riding or otherwise use and control, or lack thereof, of my horse or the horse I have been assigned to.

6. I understand and acknowledge that I have been provided an opportunity to inspect, survey and traverse the premises to be utilized, by the equine professional (RYYR) and I have accepted the premises in the "AS IS" condition. I also acknowledge these inherent risks of equine activities:

1) The propensity of an equine to behave in a manner, which may cause injury, harm or death to a person on or near it.

2) The unpredictability of an equine's reaction to sounds, sudden movements, unfamiliar objects, individuals or other animals.

3) An equine's reaction to certain natural hazards, such as surface and subsurface ground collisions.

4) A collision with other equines or objects.

5) An equine's response to the participant's manner of handling or controlling it or inability to handle or control it.

7. Pennsylvania has adopted an Equine Activity Immunity Act. That Act recognizes the inherent risks involved in equine activities. I have voluntarily chose to participate in these equine activities despite being aware of the risk involved.

PHOTO RELEASE - I hereby grant to RYYR the unrestricted and absolute, perpetual, worldwide right to reproduce, exhibit, display, perform, transmit, broadcast, distribute, modify, create derivatives, and otherwise use the photograph(s) of myself and any minor(s) identified below (the "photograph(s)") for any purpose whatsoever ("Grant"). I acknowledge that the purposes for which the photographs may be used include without limitation, RYYR publications, videos, books and newsletters. I agree that this Grant includes, without limitation, the right to use the photograph(s) - or part of it - in combination with, or as a composite of, other matter, including, but not limited to text, data, images, photographs, illustrations, animation and graphics, video or audio segments of any nature, in any media embodiment, now known or hereafter developed, including, without limitation, print, film, video tape, DVD, broadcast, digital

transmission and electronic/online media. I acknowledge that this Grant includes the right to use the name of the minor(s) identified below, whether in original or modified form, or fictitious name, in connection with the photograph(s). I hereby voluntarily release and forever discharge - for myself and on behalf of the minor(s) identified below - RYYR from any and all claims, demands, or causes of action for libel, defamation, invasion of privacy or right of publicity infringement of copyright, or violation of any other right arising out of or relating to any utilization of the photograph(s) or the name of the minors identified below. Such claims, demands, and cause3s of actions include, without limitation, inadvertent errors, such as blurring, distortion, or alteration, or based upon any decision not to make use of the photograph(s). I understand that RYYR and its licensees and assigns are relying on my consent to use the photograph(s) with respect to the promotion of various services or products. I acknowledge that neither myself nor any minor(s) identified below shall receive compensation with respect to any matter referred to in this Photo Release. All images, electronic or non-electronic, negative, positives and prints - are owned by RYYR. RYYR is free to assign and license any and all of the rights granted in this Photo Release. I acknowledge that in no event will I have the right to enjoin the distribution or exploitation of the photograph(s). I hereby relinquish any right that I may have to examine or approve the completed product(s) or advertising copy or printed matter that may be used by RYYR or its' licensees or assigns.

TRANSPORTATION VIDEO MONITORING - In the event that I utilize RYYR's transportation services, I understand and acknowledge that RYYR reserves the right to employ video monitoring and recording devices within RYYR vehicles when transporting participants, including minors, to and from RYYR's facilities. I hereby consent to the use of video monitoring and recording for the sole purpose of ensuring the safety and security of participants and staff during transportation. I understand that these recordings are intended to protect the wellbeing of all individuals involved and may only be used for internal review, security purposes, or as required by law. I further acknowledge that any audio monitoring features in these recordings will be disabled in compliance with Pennsylvania law, and I expressly waive any objections or claims related to the absence of audio recording. I hereby release for myself, and on behalf of the minor(s) identified below, RYYR, its employees, agents, and representatives from any and all liabilities or claims arising from the use of video monitoring during transportation, including but not limited to invasion of privacy and the absence of audio monitoring.

Persons voluntarily entering into this Release and Hold Harmless Agreement:

**If you are signing for yourself:**

\_\_\_\_\_  
Signature ( must be 18+ to sign for yourself)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date of Birth of signer

**If you are signing for a minor.** person representing himself/herself to the lawful Guardian under this Release and Hold Harmless Agreement:

\_\_\_\_\_  
Signature of Guardian/Parent of Minor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date of Birth of signer

## **Workshop, Greenhouse, Activities Waiver**

RELEASED PARTIES INCLUDE: Ready Yourselves Youth Ranch (RYYR), it's agents, owners, officers, volunteers, participants, employees landlords and property owners and all other persons or entities acting in any capacity on their behalf (collectively referred to as "RYYR").

RELEASING PARTIES INCLUDE: the undersigned participant and minor(s) listed in the Agreement, participant's spouse, children, parents, guardians, heirs, next of kin, and any legal or personal representatives, executors, administrators, successors and assigns, or anyone else who might claim or sue on participants behalf.

IN CONSIDERATION OF RYYR SEVICES: I hereby agree to release and discharge RYYR on behalf of myself, my heirs, assigns, personal representatives ny estate and any other person listed in this Agreement ( cumulatively "participant", "I", "myself"), and as follows:

1. I understand that in any RYYR activity I may use inherently dangerous tools, equipment, machines, chemicals or substances. Such activities include, without limitation, participating in fishing, woodworking, sewing, crafting, baking, and in gardening. I agree that I will not use equipment or materials without familiarizing myself with their safe use. I will educate and inform myself on the inherent dangers and risks that are associated with participation in any RYYR activity. I will inspect any related facility and equipment to be used an support of an activity at RYYR, and if I believe anything is unsafe, I will immediately advise RYYR of such condition. I acknowledge that risks of this nature could lead to illness, serious injury or even death. I am aware that my own behavior can affect my personal safety and the safety of others involved at RYYR. I will act according to all RYYR rules, instructions and policies

2. Knowing the risks described above, I agree, on behalf of myself, my family, heirs, and personal representative(s), to assume all risks and responsibilities surrounding my participation in such activities. To the fullest extent permitted by law, I release and indemnify RYYR from and against any present or future claim, loss or liability for injury to person or property which I may suffer, up to and including death, or for which I may be liable to any other person, during or as a result of my participation in any activity at RYYR.

3. I have carefully read this consent form, have been given the opportunity to ask questions and fully understand its contents. No representations, statements, or inducements, oral or written, apart from this form, have been made, except for those made by me in RYYR's participation agreement (which is incorporated herein by this reference. My agreement to the provisions in this form are voluntary. I agree my releases are binding upon me, the minor(s) below for whom I am contracting, my heirs, executors, administrators, legal representatives and successors. Should RYYR or anyone acting on its behalf be required to incur attorney's fees and costs to enforce this Agreement, I agree to indemnify and hold them harmless for all such fees and costs. I agree that the validity and enforceability of this Agreement will be governed by the substantive law of Pennsylvania, without regard to its conflict of law rules. If a provision of the Agreement is determined to be unenforceable in any respect, the enforceability of the provision in any other respect and of the remaining provision of this Agreement will not be impaired. I agree that any action, suit, or proceeding arising out of the subject matter of this Agreement will be litigated in courts located in Beaver County, Pennsylvania. I consent and submit to the jurisdiction of any local, state, or federal court located in Beaver County, Pennsylvania.

Name: \_\_\_\_\_ Phone # \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_  
Emergency Contact: Name: \_\_\_\_\_ Phone # \_\_\_\_\_ Relationship: \_\_\_\_\_  
Medical Insurance Information: Insurance Company: \_\_\_\_\_ Policy # & ID \_\_\_\_\_

***I had the opportunity to ask questions about this document before signing it. I read and understood all of it, and by my signature I agree to be bound by each and every one of the terms herein.***

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I am the parent or legal guardian of the above applicant, have read and foregoing consent form, and will be legally responsible for the obligations and acts of the applicant as described in this form, and agree, for myself and for the applicant, to be bound by its terms.

\_\_\_\_\_  
Print name of parent / guardian                      Signature    Date

***I have made my own investigation and inspection of the facility and equipment to be used and am willing to accept the above described risks \_\_\_\_\_ (initials)***