



Chamounix Equestrian Center
98 Chamounix Drive
Philadelphia PA, 19131

Dear Parent/Guardian,

Thank you so much for your interest in the Work to Ride (WTR) program. We are a nonprofit located in West Fairmount Park that empowers youth through horsemanship, equine sports and education. **Applicants must be: Philadelphia residents, between 8 and 18 years old, and reside in underserved communities.**

WTR is a year-round program. Youth will first enter into the Sunday Program, where they are expected to be at the barn for 3 hours every Sunday. The instructor will set the designated weekly time of arrival. Once youth demonstrate the necessary horsemanship skills, they will move up to Saturday Program, increasing their weekly time commitment. The program runs regardless of heat, rain, snow, sleet or hail. Youth that have academic challenges are required to attend tutoring at Chamounix Equestrian Center and/or their school. Attendance and timeliness are valued qualities and students must adhere to WTR standards in order to remain in good standing.

We have a rolling admissions policy. Please make sure ALL information is enclosed with the application. *Applications will be considered incomplete and ineligible for consideration if information is missing.* Once we receive your application it will be reviewed and if you meet the basic requirements, you will be invited to an orientation at Chamounix Equestrian Center. Attendance of both parent/guardian is mandatory at the orientation which will be followed by an interview. Youth are expected to commit to at least one year of participation.

Regards,

Irene Lobron
Director of Outreach & Afterschool Coordinator
Work to Ride, Inc.



Work to Ride Information and Requirements Form

WHAT IS WORK TO RIDE?

Started in 1992 by Lezlie Hiner, Work to Ride (WTR) utilizes horses and horseback riding in unique and innovative ways to engage youth in wholesome, constructive activities. This unique, Philadelphia-based program encourages riders to engage in experiences such as horse shows, training at specialty barns, trips outside of the local area, and attending horse related events. Riders expand their networks and meet other equine competitors, expanding social horizons and build relationships. The responsibilities of caring for horses and other animals and learning to ride sharpens problem-solving, teamwork, leadership and cooperation skills. Riders must attend school and do well. These multiple demands on their time increases confidence and hones competence and grit. Successful riders manage many demands on their time. The WTR culture fosters development of maturity, poise and communication with people from all walks of life.

FUNDING

WTR is a nonprofit, community-based intervention program designed for at-risk youth from low-income families residing in the City of Philadelphia. We do not receive support from any city, state, local or federal agency. It costs approximately \$10,000 for each rider to participate in the program including horse, barn and pasture upkeep, travel to competitions, support for entry fees and maintenance of equipment. Funds come from individual and organization donors and grants. In addition, staff and volunteers provide essential services to care for the horses, tutor and mentor riders and organize fundraising efforts.

PROGRAM OVERVIEW

Applications are reviewed by the WTR staff on a rolling basis. In considering admissions to the program, WTR staff make every effort to ensure that program resources go to the children that need them most. Admission to the program is based upon financial need, residency requirements and parent/child commitment.

Both parent and child must commit to the program for a *minimum* of one year. This includes attendance, completing weekly duties and responsibilities, adherence to program rules and school achievement. Parental support is extremely important for continuation of the program and strengthening your child's success. Attendance and timeliness are necessary. Horses require care even if the weather is bad and travel inconvenient.

Riders are involved in everything related to horses; barn cleaning, horse maintenance and care, barn management practices, nutrition, riding, field trips and opportunities to travel, learn and work.

REQUIREMENTS

- Youth must reside in a low income household within the Philadelphia limits
- Youth must be enrolled in and attending school
- Youth must be between the ages of 8 and 18 years old
- Violence of any kind will not be tolerated and will result in suspension or expulsion.
- Drugs of any kind are prohibited. If found, youth will be expelled or suspended.
- **1040 & W2 forms must be turned in annually no later than May 1st annually.** Failure to comply will put your child on temporary suspension until 1040 forms are received.

WTR ATTENDANCE

Two (2) absences are allowed per quarter, but must be accompanied by a letter of explanation signed by the parent or guardian. In any given quarter, if the child is late two (2) times it will be counted as an absence. If there is a family commitment or illness that does not allow the child to be at the program, the parent must notify WTR by Friday of that week. Failure to call will result in a suspension for the following weekend. If the child misses two (2) consecutive weeks, WTR will assume that the child does not have the commitment required. The child will be expelled from the program

SCHOOL ATTENDANCE

Youth cannot remain part of WTR if they do not go to school. Nonattendance will result in expulsion from the program. Interscholastic team members may not miss more than 10 days in a school year. **Parents are responsible for making sure children submit their report cards to the WTR Program Director on a quarterly basis. This is mandatory.**

EXPLANATION OF GUIDELINES

WTR is a year round program. Your child's participation depends on what they put into it. Thursday-Sunday participation is a minimum amount of time needed to participate in the program.

As riders gain skill and competence and are able to meet certain criteria, they can become involved in horse shows, parades, play outdoor polo, play interscholastic polo, participate in hunter paces, etc. These children will be required to put in more hours and parents or guardians more involved.

Children wishing to play interscholastic and outdoor polo have more rigorous guidelines, which includes: minimum grade average, minimal school and program absences, a responsible attitude, and above average participation. Schedules will be sent to parents for special events and field trips.

WTR places a special emphasis on report cards. They must be turned in. Children will not be allowed to participate at the stable until the report card is turned in. WTR participants must have a grade C minimum to participate in interscholastic and outdoor polo. WTR will make every effort to offer tutoring and assistance to help our participants maintain a grade C average. Youth are expected to raise their grades by the end of their first year of participation.

APPLICATION REQUIRED ITEMS

Application will not be processed without the following **5 items**:

- Signed Information and Requirements Form
- Fully Completed Application Form
- 300 word essay completed by applicant
- Copy of applicant's latest report card
- Copy of parent/guardian's most recent W2 form & any other additional supporting documents

Acknowledgment and Signature

I understand all requirements and I acknowledge that I must submit all necessary documentation, including my completed application to be considered by Work To Ride.

Signature Gaudian 1		Date	
Signature Gaudian 2		Date	



Work To Ride: Application Form

1. Youth Applicant Information

First Name: _____ Last Name: _____

Date of Birth: _____ Age: _____ Grade Level: _____

Street Address: _____

Apt #: _____ City: _____ State: _____ Zip: _____

Has youth applied to Work to Ride before? If so, when?: _____

Is youth involved in any other youth program activities? If yes, explain: _____

How did you hear about Work to Ride?: _____

2. Parent/Guardian Information

Guardian 1:

First Name: _____ Last Name: _____

Phone Number: _____ Email Address: _____

Street Address: _____

Apt #: _____ City: _____ State: _____ Zip: _____

Job Title: _____ Company Name: _____

Guardian 2 (leave blank if single guardian household):

First Name: _____ Last Name: _____

Phone Number: _____ Email Address: _____

Street Address _____

A/pt #: _____ City: _____ State: _____ Zip: _____

Job Title: _____ Company Name: _____

3. Education

Youth cannot be part of WTR if they do not go to school. Nonattendance will result in expulsion from the program.

School youth is currently enrolled: _____

School Phone Number: _____

Dates Attended From: _____ To: _____

School youth last attended: _____

Dates Attended From: _____ To _____

Reason for leaving: _____

Is youth struggling in any particular subject(s) or area(s) of school? Explain:

Does youth receive additional tutoring outside of class? Explain: _____

4. Youth At-Risk-Eligibility Information

Work to Ride is designed to serve children who qualify as low income and at-risk, who reside within the Philadelphia limits.

Please respond to the following questions by circling "Yes" or "No":

Does the applicant have an Individual Education Plan (IEP) at school due to learning, emotional, or behavioral disability? (If yes, please attach IEP documentation)	Yes	No
Has youth ever been suspended, expelled, truant, or had their grades drop?	Yes	No
Does youth reside in a high crime or impoverished area within the city of Philadelphia?	Yes	No
Does youth currently attend a school now or previously qualified as "persistently dangerous" by the PA Dept. of Education?	Yes	No
Does youth attend English as a second language class?	Yes	No
Is youth at risk for problems with the law?	Yes	No
Is youth currently a foster child?	Yes	No
Is youth currently homeless?	Yes	No

If you answered "yes": to any questions above, please explain: _____

Would you define youth as "at risk" for any reason **not** mentioned above? Please explain:

5. Income Eligibility Information

Work to Ride is designed for children whose families qualify as low income. Income qualification is evaluated on a case-by-case basis, and takes into account public assistance, combined household income, and number of household dependents.

Do youth and/or guardians receive any of the following types of public assistance? Please circle "yes" or "no" below. **If you circle "yes" to any part of this section, attach a copy of public assistance documentation that applies to selection.**

1. MN Family Investment Program (MFIP) or Temporary Assistance For Need Families (TANF)	Yes	No
2. General Assistance (GA)	Yes	No
3. Refugee Assistance	Yes	No
4. Food Stamps	Yes	No

Does the guardian receive SSI?: _____

How many persons, including youth, related to youth by blood or adoption, have been living in the youth's residence for the last 6 months?: _____

How many members of the household are qualifying dependents (children or relatives who are supported by the head of household or married couple)?: _____

What is the total annual income of the entire household*?: \$ _____

**Include as income: gross wages, net income from self employment, unemployment compensation, rental property income, alimony, workers compensation, pensions, SSDI, OASI, interest, dividends, and form of public assistance including SSI, child support, tax refunds, loans, foster child payments, or HUD rental assistance payments. po*

Any additional details you would like to share:

Please list all household residents residing with applicant, relationship to applicant, age, and whether the resident earns any income. Please note that this application must include all income information and documentation for each household resident, regardless of legal guardianship of child:

Name	Relationship to Applicant	Age	Does this resident earn income?
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

5. Essay

Youth applying must write and submit a 300-450 word essay. The essay may be handwritten or typed on a separate piece of paper. Please include your full name, grade, and the date.

Prompt: Why do you want to join Work To Ride and what goals do you have that WTR may help you reach?

The essay should demonstrate an understanding of what WTR is.

6. Use of Your Data Information

The purpose of this form is to tell you we may use the information from your application and participation in the program. It also tells with whom we might share this information and what will happen if you choose not to provide it.

We are asking for the information to help us decide whether youth is eligible for the program and what other services you may need to participate.

- We may use this information to prepare required reports, conduct audits, review eligibility, and to find out how the program is helping you.
- We may share this information with staff for purposes of performing their official duties, and with federal, state, and local agencies.
- You are not required to provide this information, however, if you choose not to provide this information we may not know whether you are eligible for the program and may not be able to accept you. Providing false information can lead to removal from the program.

7. Application Disclaimer and Signature

I certify that I have read this application and that my answers are true and complete to the best of my knowledge.

I agree to provide, if requested, any documentation necessary to verify the information on this form. I also give my permission to my child's school to release test results and other information to Work to Ride as required for acceptance into the program.

I understand that completing this application does not guarantee that my child will be accepted into the Work to Ride program.

I understand that false or misleading information in my application or interview may result in my release.

Signature Guardian 1		Date	
Signature Guardian 2		Date	

Please be sure to attach ALL supporting documents listed on page 3 of the Information and Requirements Form. Applications with missing information are not processed.

RELEASE AND HOLD HARMLESS AGREEMENT

Chamounix Stable/ Work to Ride 98 Chamounix Drive Phila, PA 19131 215-877-4419

Instruction/Activity/ Participation Agreement and Liability Release

By this agreement, made and entered this _____ day of _____ 20____ by and between _____, who resides at _____ and Chamounix Stable/Work to Ride, Inc., 98 Chamounix Drive, Phila, PA 19131, herein referred to as "This Stable". It is hereby agreed to as follows:

1. That I, the undersigned, do for myself or on behalf of my child or legal ward, hereby voluntarily request to participate in riding instruction as a student at THIS STABLE, and that student will either ride his or her own horses, or school horses provided by THIS STABLE for instruction purposes.

2. That in the last two years student has ridden horses (write students initials beside appropriate riding time)
A. Less than 10 hours _____ B. 10 to 20 hours _____ C. 20 hours or more _____

3. That parent or guardian and student understand that horses are unpredictable by nature: that when frightened or angry or under stress, a horses natural instincts are to jump forward or sideways, to run away from danger at a trot or gallop, to kick, to jump, to back, to rear up in front, to bite, that horses are extremely powerful; and that if a rider falls to the ground, fall distance will generally be from 3 1/2 to 5 1/2 feet. I understand these risks, and voluntarily assume these risks and dangers.

4. That parent or guardian and student understands that hereafter upon mounting the horse and taking up the reins the student is in primary control of the horse and that THIS STABLE, nor the City of Philadelphia, including the officers, agents, employees, boards, servants, commissioners, or representatives are responsible for the results of the student's actions or inactions. The student further agrees not to abuse, misuse or deliberately agitate the horse as these actions may result in increased risk to him/her and others.

5. That I have been advised that students should purchase and wear a helmet or hard hat in and around THE STABLE as to prevent horse related injuries.

6. Liability Release: That I understand that I am responsible for bodily injury or property damage which I or my child or legal ward should sustain on THIS STABLE's premises and/or trails and/or while riding a horses, and or while in transit to horse shows, trail rides, or similar expeditions, and for any time I or my child or legal ward shall lose from employment or school or other activity, and for medical expenses or any other expenses incurred because of such bodily injury or property damage, and that I hereby, for myself, my heirs, administrators and assigns release and discharge the owners, operators, boards, instructors, staff. And sponsors of THIS STABLE, Work to Ride, City of Philadelphia, including its officers, agents, employees, boards, servants, commissioners, and representatives and all other participants of and from all claims, demands, actions and causes of action for such injuries sustained to my person, or that of my child or legal charge and/or property.

7. That the student is currently covered by accident-medical insurance and will remain insured for the duration of all riding instruction at THIS STABLE.

Name of Insurance Company _____
Policy Number _____

I further understand that should medical emergency treatment be required, the current insurance information listed here will be provided to the attending clinic or hospital to cover future payment of incurred bills.

8. That this agreement is entered into in the State of Pennsylvania and will be interpreted and enforced under the laws of this state.

9. Upon the signing of this agreement, the student acknowledges that he/she has read and agrees to be bound to THIS STABLE's rules attached as exhibit "B" and incorporated herein by this reference.

I, THE UNDERSIGNED BEING OF LEGAL AGE AND SOUND OF MIND AND NOT BEING UNDER THE INFLUENCE OF ALCOHOL, DRUGS OR INTOXICANTS HAVE READ AND UNDERSTAND THE FOREGOING AGREEMENT AND RELEASE. FULL NAME (S) OF STUDENT RIDER (S) IF UNDER AGE OR GUARDIANSHIP

- 1. _____
- 2. _____
- 3. _____

PLEASE PRINT ALL INFORMATION EXCEPT SIGNATURE

NAME OF RIDER _____ NAME OF PARENT/GUARDIAN _____
SIGNATURE OF RIDER OR GUARDIAN _____

DATE ____ / ____ / ____

Address of Rider/Guardian _____

City _____ Zip _____ Phone _____