COUNTY OF LOS ANGELES
DEPARTMENT OF ANIMAL CARE AND CONTROL
EQUINE RESPONSE TEAM VOLUNTEER APPLICATION

LOS ANGELES COUNTY ANIMAL CARE & CONTROL redefining CARE

SECTION 1: PERSONAL INFORMATION

LAST NAME	FIRST NAME	DATE OF BIRTH	AGE
ADDRESS	CITY	STATE	ZIP
E-MAIL ADDRESS		EMPLOYER	
HOME PHONE ( )	WORK PHONE ( )	CELL PHONE ( )	
FAX ( )	OTHER ( )	CELL PHONE PROVIDER(Verizon, AT&T, etc.)	

Have you, as a juvenile or adult, ever been convicted, fined, imprisoned, or placed on probation or suspended, or have you forfeited bail in connection with any offence (except for traffic tickets which involved faulty equipment, parking, hand signals or speeding) in any civil or military court of law? Include convictions dismissed under Penal Code 1203.4 and any major traffic offenses resulting in a warrant.

☐ Yes ☐ No If yes, please explain: _____

SECTION 2: EMERGENCY CONTACTS

1) LAST NAME	FIRST NAME	RELATIONSHIP
HOME PHONE ( )	CELL PHONE ( )	WORK PHONE ( )
2) LAST NAME	FIRST NAME	RELATIONSHIP
HOME PHONE ( )	CELL PHONE ( )	WORK PHONE ( )

SECTION 3: *MEDICAL INSURANCE COVERAGE

Do you have medical coverage? ☐ YES ☐ NO

** Volunteers are strongly encouraged to have their own medical insurance coverage. The County of Los Angeles does provide some limited medical coverage. If you do not have Medical Insurance coverage, you may still become a member of our volunteer team.*

SECTION 4: A CURRENT, VALID DRIVER'S LICENSE, VEHICLE AND MEDICAL INSURANCE ARE REQUIRED FOR ALL ERT VOLUNTEERS. PHOTOCOPIES MUST BE INCLUDED WITH THIS FORM.

Driver's License Number:	Class C ☐ Class A ☐
Vehicle Insurance Company Name:	Policy Number:
Medical Insurance Company Name:	Policy Number:

How did you hear about ERT?

☐ Friend ☐ Newspaper ☐ TV/Radio ☐ Brochure

☐ Social Media ☐ Other

SECTION 5: EXPERIENCE AND SKILLS

Do you currently volunteer with any other emergency response or animal welfare organizations? If so please list:

Education: ☐ **High School** ☐ **Jr. College** ☐ **Bachelors** ☐ **Masters** ☐ **PhD** ☐ **Other:** _____

Do you currently own horses/livestock? If so please list:

Do you have any specialized training:

☐ First Aid - Humans ☐ First Aid - Animals ☐ CPR ☐ ICS ☐ Other ☐ Animal handling

I have experience handling the following animals:

☐ Horses ☐ Donkey/Mules ☐ Cattle

☐ Pigs ☐ Goats ☐ Wildlife

☐ Dogs ☐ Cats ☐ Other: _____

Briefly describe your experience with horses and/or livestock:

I wish to be an active member in:

☐ **Evacuation Team** ☐ **Activation Team** ☐ **Sheltering Team** ☐ **I have my own truck/trailer**

Signature: _____ **Today's Date:** _____