



Riding for the Disabled Association SA Inc.

VOLUNTEER REGISTRATION 2024

NEW REGISTRATION RENEWAL RDA CENTRE:

Name: Mr/Ms/Miss/Mrs _____ Date of Birth: _____

Address (postal): _____

Postcode: _____

Phone No: (home) _____ (mobile) _____

Email: _____

ID Verification (New volunteers only): ID sighted, Verified By: Date:

EMERGENCY CONTACT:

Name: Relationship: Phone:

* Volunteering with RDASA requires NDIS Worker & DHS Child Screenings (Please speak to your Centre.)

WWCC Ref No: Date of Release/...../.....

NDIS Worker Screening Ref No: Date of Release/...../.....

NDIS Worker Orientation: Date of Attainment/...../.....

DO YOU HAVE ANY SKILLS OR QUALIFICATIONS THAT MIGHT HELP YOUR RDA CENTRE?

- Working with people with disabilities Finance Promotion & Fundraising Catering
- Working with horses Business Building & maintenance Gardening
- Pasture management Administration Photography Other

WHEN ARE YOU AVAILABLE TO ATTEND YOUR LOCAL RDA CENTRE:

Mon: am/pm Tues: am/pm Wed: am/pm Thurs: am/pm Fri: am/pm Sat: am/pm Sun: am/pm

Do you have an existing medical condition or take medication which could affect the safety of you or others? **YES / NO**
If **YES**, please state the condition/medication and **attach a Health Care Plan** developed in consultation with your medical practitioner so that we can provide appropriate medical assistance if needed:

Do you have any special needs we need to be aware of for the safety of you or others? **_YES / NO**
Details:

Consent to Medical Attention

I authorise the RDA centre to administer first aid and call an ambulance. I agree to bear any cost thereby incurred.

Date: _____ Signature: _____

Photo & Videography Consent

I acknowledge and consent to photographs and other images being taken of me during my participation in RDA activities. I acknowledge that the photographs/images are owned by RDA. RDA may use the photographs/images for promotional or other purposes without my further consent being obtained.

If you may tow an RDA SA float / trailer or drive a vehicle, please complete Driver's Licence details.

Driver's Licence No: Class: Driver's Licence Expiry Date:

Infection Control: (for NDIS audit purposes)

Do you work / volunteer with another organisation? YES NO

If Yes, Name of other organisation:

Risk Warning & Acknowledgment

Description of Activities¹:

¹ RDA includes its officers, employees, members, agents, contractors, coaches and centre committees and assigns RDA.

The Public Liability policy provides cover for the following listed activities. Horse riding and related activities officially sanctioned and under the control of an insured RDA centre including but not limited to: • Horse riding • Venue property owner/occupier • Vaulting, Carriage Driving, Rides • Displays, Exhibitions, Performances • Competitions • Governance, administrative or social activities including social club operating, Food and Beverage Canteen Operators • Fundraising • Maintenance of horse riding venues • Carer of Horses • Risk Management administration • Membership services coordination including website and social media management and administration • Rules and Regulations provider • Distribution of newsletters and brochures • Developers and Promoters of horse riding activities for the disabled • Course education providers • Coaching, Teaching and Instruction of RDA activities

As a Volunteer I acknowledge, agree and understand that:

- My duties may include working with and around horses including horse riding activities.
- Participation in horse riding and horse related activities can be inherently dangerous.
- Serious accidents can and do happen.
- By my participation in any Activities arranged by RDA, certain risks or dangers may be present which could result in:
 - Physical, bodily or psychological injury or death.
 - Physical exertion to which I am not accustomed.
 - Failure of equipment
 - There being no or inadequate facilities for treatment or transport to treatment if I am injured.
 - The conditions in which the activities are conducted varying without warning.
 - My causing injury to other persons and/or other persons causing injury to me.
- The Activities are being undertaken for the purposes of recreation, enjoyment or leisure, and involve a degree of risk of physical harm.
- The Activities may be undertaken with one or more other persons as part of a group and that RDA is not liable for the actions of other participants in the group activity.
- There are risks associated with the Activities and/or recreational services and I undertake any such risk voluntarily and at my own risk.
- Riding activities will be supervised to the level of my abilities however I may exercise my right to decline opportunities to ride without prejudicing my involvement as a volunteer. I may also exercise my right to change my mind in this matter at any time.
- All information relating to RDA Participants is confidential and I cannot disclose such information to anyone other than as required to provide and/or participate in the RDA Activities.

Volunteer's Warranties

I agree to and warrant that I will:

- abide by all of RDA's rules including but not limited to the child safeguarding rules, policies, standard operating and safe work procedures, the Volunteer Information Package and Code of Conduct, Constitutions and any direction or instruction given to me by RDA during the course of the Activities.
- use and/or wear any equipment given to or required to be worn by me by RDA.
- not engage in any reckless, negligent or foolish behaviour or any other behaviour that is likely to cause injury to me, any other participant or person.
- Carry out the work they have agreed to do responsibly and ethically.
- Notify the organisation as soon as possible of absences.
- Adhere to policies and procedures

I declare and warrant that I am medically and physically fit and able to participate in the Activities. I acknowledge that I must, and warrant that I will, disclose any pre-existing medical or other condition, injury or concern that may affect the risk that either I or any other person will suffer injury, loss or damage during the course of the Activities and notify RDA of any injuries, illness or concerns that may arise during the Activity.

I agree that if I suffer any injury or illness, RDA may provide evacuation, first aid, ambulance and/or medical treatment at my expense and that my acceptance of these terms and conditions constitutes my consent to such evacuation, first aid, ambulance and/or medical treatment and agreement to bear any cost thereof. This does not negate cover for your personal injury under the RDA's personal insurance policy. RDA SA has a statutory duty under WHS legislation to provide you with safe systems processes and workplace.

I warrant that I will not consume any alcohol or mind-altering substance, or medication that may impact my judgement or physical capacity, before or at the time of engaging in the Activities.

PLEASE NOTE: RDA strongly recommends all volunteers to be up to date with Tetanus immunisations, COVID-19 vaccination and boosters and immunisation against Hepatitis B is advised. COVID-19 vaccination and boosters may be mandatory in your State or Territory (contact your Centre or State Office for details).

2 Activities includes all activities and services ancillary to or associated with the named Activity, both before and after the Activity, including transportation to and from the location of the Activity whether provided by RDA or not, briefings, inductions, training, and the provision of information in all manuals, safety guidelines and other documentation provided to or made available to the Participant with respect to the Activity, familiarisation with clothing or equipment and methods of operation of equipment and the wearing and removal of any clothing or equipment associated with the Activity. Unless otherwise specified, a reference to an Activity is a reference to a recreational service or a recreational activity as defined in relevant legislation referred to herein.

Waiver/Exclusion of liability

I agree to and unconditionally release, waive, discharge and forever hold harmless, RDA or any of its employees, agents, directors or officers, from any claims as a result of any personal injury sustained, whether caused by RDA's negligent act or wilful act or omission, breach of contract, breach of statutory duty, error, or otherwise in connection with or arising out of the Activities.

I agree that RDA will not be liable for any claims for personal injury that may be brought against it as a result of or in connection with any act, omission, default, failure or error on the part of RDA, and agree to indemnify and keep indemnified RDA in respect of any such claims.

It is possible for a supplier of recreational services to ask you to agree that the statutory guarantees under the *Australian Consumer Law* (which is schedule 2 to the *Competition and Consumer Act 2010* (Cth)) do not apply to you. If you sign this form, you will be agreeing that your rights (or the rights of a person for whom or on whose behalf you are acquiring the services) to sue RDA in relation to RDA's services or the activities that you undertake because the services or activities provided were not in accordance with the guarantees are excluded, restricted or modified as set out below.

By signing this form, you agree that the liability of RDA in relation to the activities (as defined by the *Competition and Consumer Act 2010* (Cth), and the *Australian Consumer Law*) and recreational activities (as defined by the *Civil Liability Acts and legislation relevant to your State or Territory*) for any:

- (a) Deaths;
- (b) Physical or mental injuries (including the aggravation, acceleration or recurrence of such an injury);
- (c) The contraction, aggravation or acceleration of a disease;
- (d) The coming into existence, the aggravation, acceleration or recurrence of any other condition, circumstance, occurrence, activity, form of behaviour, course of conduct or state of affairs in relation to an individual:
 - (i) That is or may be harmful or disadvantageous to you or the community; or
 - (ii) That may result in harm or disadvantage to you or community;

that may be suffered by you (or a person for whom or on whose behalf you are acquiring the services) resulting from the supply of the recreational services or recreational activities is excluded.

Declaration and Signature:

In signing this registration form I understand the following:

- I have read carefully and understood this Volunteer Registration Form including the Risk Warning & Acknowledgement, Volunteer's Warranties and Waiver/Exclusion of Liability and sign it freely and voluntarily without inducement of any kind.
- I have read and understood the Privacy Collection Notice (**see overleaf & Volunteer Information Booklet**)
- I have read and agree to the Code of Practice (**see overleaf & Volunteer Information Booklet**)
- I commit to abiding by the RDA SA Code of Conduct and Confidentiality requirements
- I agree to abide by all policies, standard operating procedures, rights and responsibilities outlined in the Volunteer Information Booklet, to abide by the constitutions and policies of my RDA centre and RDA Australia.
- I agree to allow RDA SA to sight my DHS children's clearance certificate prior to my acceptance as a volunteer and to provide RDA SA with updated versions as necessary. (*It is State legislation for volunteers to hold a DHS Clearance to work with children and/or vulnerable adults, including the aged and those with disabilities*)
- I commit to being present on the days and at the times agreed with the local committee representative
- I have been provided with the RDA SA policy for resolving grievances and disputes.
- RDA SA urges all volunteers be up to date with tetanus and Covid-19 immunisations. Hepatitis B immunisation is also advisable.
- I acknowledge I am required to show evidence of completing the NDIS New Worker Module within 1 month of starting to enable my participation within RDASA.

Signature: **Date:**

APPLICANTS UNDER THE AGE OF 18 REQUIRE THE PERMISSION OF THEIR PARENT/GUARDIAN TO VOLUNTEER.

This is to certify that I, as a parent/guardian with legal responsibility for the Volunteer, acknowledge, understand and accept all of the above and consent to his/her release as provided above. I release and agree to indemnify and hold harmless RDA from any and all liabilities arising from my minor child's involvement or participation in the Activities and/or recreational services, even if arising from the negligence of RDA.

Legal Guardian Signature: (parent/guardian) **Date:**

Guardian Printed Name:

Witness Signature: **Date:**

PRIVACY COLLECTION NOTICE

Riding for the Disabled Association of Australia Limited ABN 99 116 408 587, its Member States and Associate Members, and their respective RDA Centres ("RDAA") collect your personal information for the following purposes:

- to assess your application to register as a participant, coach, volunteer, member and/or director with RDAA;
- to provide you with any required assistance, training and, if applicable, accreditation to perform your role within RDAA;
- to keep you up-to-date about RDAA activities, policies and procedures;
- to provide you with the information or services that you have requested;
- to identify risk and deliver the best support and service for your needs;
- to administer our directors, membership, participants, coaches and volunteers and/or resolve any queries or complaints;
- to report to government, funding bodies and as required by law;
- subject to your express permission, for promotion and marketing; and
- to identify risk and implement appropriate controls to prevent or manage COVID-19 or such other communicable diseases as recommended by the relevant government authorities in RDA Centres and other RDAA workplaces.

This Collection Notice applies to personal and sensitive information, such as health information, information, that RDAA collects via phone, hardcopy and electronic formats throughout the application, registration and accreditation process and during your time with RDAA and/or at any RDA Centre. RDAA takes all reasonable steps to protect personal information held in its possession against loss, unauthorised access, use, modification, disclosure or misuse.

If you do not provide us with the requested information, we may not be able to process or assess your application for registration and/or accreditation, assist you with your specific enquiry or request, or provide our services to you. We may share your personal information with third parties in order to conduct our business and deliver our services, including but not limited to, those contracted to and/or involved in providing, managing or administering our services, health referral organisations, medical and health professions, hospitals, our professional advisors, government departments, regulators, your family members or carers, Enduring Power of Attorney and/or substitute decision-makers and other relevant bodies when required and authorised to do so by law. RDAA may also disclose your personal information to third parties with your consent and/or in emergency situations if it is reasonably necessary.

Our privacy policy (available at <https://www.rda.org.au/privacy-statement/>) includes our contact details, explains more about the types of personal information we usually collect and how we handle your personal information, as well as how you can seek access to and correction of your personal information, how to make a privacy complaint and how we deal with these complaints

Statistical information may be released to the South Australian government for reporting purposes only. No information is used for any purpose other than stated above. RDA SA does not sell, rent, lend or give away its volunteer client or membership lists. RDA SA actively strives to ensure that all personal information is protected from misuse, including unauthorised disclosure, modification or access. Individuals may request to view any personal information held by RDA.

CODE OF PRACTICE – RIGHTS & RESPONSIBILITIES **GOVERNING VOLUNTEERS INVOLVED with RDA SA**

To enhance volunteers' experience and comply with current legislation and duty of care RDA will, as appropriate:

- Manage volunteer interactions in accordance with anti-discrimination and equal opportunity legislation;
- Provide volunteers with induction, orientation and training opportunities;
- Provide volunteers with a healthy and safe workplace in accordance with current requirements;
- Provide appropriate insurance coverage for volunteers;
- Define volunteer roles and develop clear job descriptions;
- Provide appropriate levels of support and management for volunteers;
- Provide volunteers with access to a RDAA Volunteer Handbook and to all related RDA volunteer policies;
- Provide volunteers information on grievances, rights, responsibilities and disciplinary policies & procedures;
- Acknowledge the rights of volunteers;
- Reimburse out of pocket expenses incurred by volunteers on behalf of RDA *providing prior approval has been given* by the relevant RDA Centre committee;
- Provide volunteers with accurate and truthful information about RDA;
- Deal with volunteers' confidential and personal information in accordance with the National Privacy Act 2001;
- Acknowledge that the relationship between RDA and volunteers is reciprocal in nature;
- Acknowledge that volunteers are of equal status and deserve the same treatment as paid employees, and that RDA can expect the same standards of its volunteers as it expects of its paid employees;
- Ensure that volunteers only work in the area/s of their choice.

CENTRE AND STATE OFFICE USE ONLY:

- | | |
|--|--|
| <input type="checkbox"/> Centre volunteer records updated | <input type="checkbox"/> Grievance Policy given to volunteer |
| <input type="checkbox"/> Copy of registration sent to RDA State Office | <input type="checkbox"/> Code of Conduct |

Hygiene

- If you feel unwell stay at home.
- Cover your mouth with a tissue or elbow when coughing or sneezing and dispose of the tissue immediately in the bin.
- Avoid touching your eyes, nose and mouth.
- Wash your hands regularly with soap and water or sanitizer if not available.
- Cover open wounds with a dressing



Hand Washing

Hands spread 80% of common infectious diseases!

- Wet your hands
- Add soap
- Rub your hands for at least 20 seconds including front, back and between your fingers.
- Rinse your hands in water
- Dry your hands with disposable paper or air dryer.



Biosecurity

The aim of biosecurity is to address the management of infectious diseases at centre level, each centre may have slightly different procedures however the principles should remain the same. The outcome is to minimise areas of cross infection between volunteers and limit traffic where possible at our centres during a pandemic situation.

Biosecurity is not just relevant to humans but animals and their environment (pastures)

- Use a disinfectant or an antibacterial cleanser for cleaning
- Wipe down frequently touched surfaces.
- Do not share equipment. Where this is not possible the equipment should be cleaned between each use by a different source.
- Isolate the possible source of infection and reduce the amount of traffic / contact.

During Pandemics or High risk scenarios

- Disposable gloves may need to be used. Ensure they are disposed of immediately.
- Clothes and shoes may need to be cleaned / changed between entering / exiting the premises or different contacts.
- Have a plan and know who to contact in an emergency.

Additional Training and resources:

- [COVID-19 infection control training | Australian Government Department of Health](#)
- RDASA Biosecurity Management plan