

## ADOPTIONAPPLICATION

IN ORDER TO BE CONSIDERED AS AN ADOPTER TODAY, YOU MUST:

*Be 18 yrs of age or older. *Have the knowledge and consent of your landlord or proof of homeownership or have an approved boarding facility *Be able and willing to spend the time and money necessary to provide training, medical treatment, and proper care for a pet. HALF reserves the right to do home checks and refuse adoption to anyone.
NAME:
ADDRESS:
CELL PHONE:
DRIVERS LICENSE #:
EMAIL ADDRESS:
AGE:
1. If you plan to keep your horse at home, do you: [ ] Own [ ] Rent your home?
2. Do you currently live in a: [ ] House [ ] Apartment [ ] Condo [ ] Mobile Home [ ] Other
3. If you plan to board your horse, please list the name of the barn and contact info:
Barn Name:
Contact Name:
Phone#:
4. What types of pets do you currently have in your household? (please list all)
Name?:
Type? :

Male/Female? :	
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Spayed/Neutered? : \_\_\_\_\_\_

When was last vaccination given? : \_\_\_\_\_\_

How long owned?: \_\_\_\_\_

5. What other animals have you owned in the past and what happened to them?

6. Have you ever surrendered an animal to a shelter or animal control facility? [] Yes [] No

If yes, please describe the circumstances

7. Who is your Veterinarian or Vet Clinic?: \_\_\_\_\_\_

- Phone #: \_\_\_\_\_
- 8. Who is your farrier? \_\_\_\_\_
- Phone #: \_\_\_\_\_
- 9. How many adults live in household? \_\_\_\_\_
- Children? \_\_\_\_\_
- Ages of children? \_\_\_\_\_
- 10. Does anyone in your household have known allergies to animals? [] Yes [] No
- If yes, please explain

11. Are you willing to care for this animal for the rest of its life? [] Yes [] No

12. If you relocate, what will you do with this animal?

13. Please describe in detail the type of horse you are looking for and what is important to you in terms of traits, qualities, etc.

14. What circumstance would cause you to give up your pets?

15. Who will care for the animal if you are sick, injured or otherwise unable?

16. What is your experience with the type of animal you are applying to adopt?

17. Do you own a horse trailer or means of transportation for the animal?

18. Do you currently own and/or care for the type of animal you are applying to adopt?

19. Will the animal be kept on your own property?

If so, how many pastures and acreage do you currently have?

20. If you will be boarding or keeping the animal off your own property, please list the name and address of the facility:

21. Please describe the type of shelter available to the animal.

22. Please describe water system, feed schedule and amount to be fed per day.

23. Please list the names & phone numbers of three professional equine references (non-family).

1.

2.

3.

## PLEASE READ AND SIGN BELOW

I certify the above information is accurate and complete to the best of my knowledge. I understand that Home At Last Farm has the right to reclaim the animal if any given information is found to be false. I authorize the release of veterinarian information related to current and past pets. Once adopted, financial responsibility of this animal rests on the new owner. This application is the property of HALF. Signature:\_\_\_\_\_

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

Thank you very much for your application. Please return it by e-mail homeatlastfarmrescue@gmail.com