

## **Adoption Application**

S 6039 Pedretti Lane De Soto, WI 54624 (608) 689-2399

## Dear Horse Lover:

How do you adopt a horse through the American Standardbred Adoption Program (ASAP)? Read, print and complete Part One of this form, and then send it to us along with a \$5.00 application fee. We will then process your application and notify you once you are approved. NOTE: You must have a vet, farrier, and personal reference to be approved. Adoption fees vary according to location and condition of each individual horse, but fees most often range from \$350 - \$800. Adoption fees help defray the costs of services pertaining to the adoption process and are nonrefundable. ASAP, Inc. is a nonprofit organization and cannot give monetary refunds. After two years of following all contract regulations, ASAP, Inc. may allow your adopted horse to become your official property.

This form has two parts: 1) Application/Placement Contract, and 2) Horse Information. The first part must be completed, signed and sent with the \$5.00 application fee to the address at the bottom of this form for processing. The second part will be completed after approval and at the time of placement.

Part One: Application and Placement Contract					
Section I: Application Form					
A. CONTACT INFORMATION					
Your Name (last, first, middle initial):	Email:				
Your Parents' Names (if you are under 18 years of age):					
Street Address:	City & State:	Zip Code:			
Home Phone:	Work Phone AND Cell Phone:				
Driver's License Number and State:	Social Security Number #:				
B. HORSE PREFERENCES					
Gender: ☐ Gelding ☐ Mare ☐ Stud ☐ No Preference					
Age Preference: ☐ No ☐ Yes If yes, specify:					
Color Preference: ☐ No ☐ Yes If yes, specify:					
Breed Preference: □ No □ Yes If yes, specify:					

Gait:   Pacer (more readily available)  Trotter  No Preference			
Size: 14-15 hands 15-16 hands 16+ hands No Preference			
What would you use the horse for primarily?			
☐ Pleasure/Trail Riding ☐ Driving ☐ Showing ☐ Handicap or Youth Program ☐ Other			
Please check all that apply:			
☐ I am experienced and intend to train the horse under saddle, if necessary.			
☐ I would like to hire a trainer to work with the horse.			
Are you interested and able to care for an injured horse?			
Are you interested in not only adopting but also providing temporary foster care for horses in the			
program?			
C. BACKGROUND INFORMATION			
Please briefly describe your previous experiences with horses and/or other animals (use back of page, if necessary):			
D. RESPONSIBILITY FOR CARE			
Have you ever been responsible for the care of a horse before? ☐ Yes ☐ No			
If yes, please describe how long ago and to what extent:			
Will the horse be boarded on your property? ☐ Yes ☐ No			
If no, provide information about the boarding facility below:			
Name:			
Address:			
Phone:			
Who will be responsible for the daily care of the horse?			
Describe in detail the shelter the horse will have:			
Size of turnout area:			
Size of turnout area.			
Kind of fencing around turnout area:			
What kind and how much hay will be provided per day?			
What kind and how much grain will be provided per day?			

What access will be provided for water?					
If possible, please send pictures of your farm, shelter, and turnout area to ASAP, Inc. To ensure that horses have a good place to go, we may have to visit your facility before we can place a horse there.					
E. REFERENCES					
	er to consider an adoption. Do not use fa				
	wn a horse, please list the small animal v	et you use.)			
Name:	How long have you used this vet?				
Address:					
Phone:					
	horse, please list a farrier you have conta	cted in your area.)			
Name:	How long have you used this farrier?				
Address:					
Phone:					
Personal Reference					
Name:	How long have you known?				
Address:					
Phone:					
Please sign below to verify that all of	the information provided in sections A-E	is truthful and accurate:			
➤ Applicant Signature:		Date:			
➤ Parent or Guardian Signature (if under 18 years of age)		Date:			
Section II: Placement Contract					
<ul> <li>Please retain a copy for your records.</li> <li>Please read carefully and sign where specified.</li> <li>The adopter agrees to the following stipulations and conditions concerning an adoption through ASAP Inc.</li> </ul>					
1. Once adopted, a horse remains the property of the American Standardbred Adoption Program. It may ONLY be transferred back to said program. Any sale or transfer of possession of named horse will result in the adopter being responsible for all attorney costs, rewards, and damages related to the return of horse to ASAP Inc. After two years of following all contract regulations, ASAP, Inc. may allow your adopted horse to become your official property. Please initial here to verify your understanding of this condition:					

3. Should a life-threatening condition arise, ASAP must be notified prior to any decision to euthanize said horse.				
4. Once an adoption fee has been paid in full, transportation costs to	adoptive home or back to ASAP Inc. during the time frame			
of an adoption remain the full responsibility of the adopter.				
5. During the adoption period, the adopter may not release the horse	from his/her care without consent of ASAP. If horse is			
relocated, ASAP must be notified. Failure to do so gives ASAP full rig	tht and responsibility to reclaim horse. The horse may never			
be raced.				
6. There are no monetary refunds on horses, and adopter understand	ds that any horse coming back into ASAP's care will not			
justify a refund. An exchange on a horse will be considered if the horse being returned to the program is returned in good				
condition, soundness, and health.				
7. Basic needs requirement: Named horse needs proper feeding to m	naintain appropriate weight. Horse must have free access to			
water, a minimum three-sided shelter, and adequate and safe fencing.				
8. Required weight: Named horse must maintain a weight and conditi				
9. Required veterinary care: Inoculations must be administered by a l				
choose to vaccinate your own horse after this time, please state whic				
A. Worming and Hoof care: Worming done every eight weeks. Hoof c				
B. April 1: Spring Inoculations: Eastern/Western Encephalitis, Tetanu				
other vet-recommended inoculations.	-, · · · · · · · · · · · · · · · · · · ·			
C. October 1: Fall Inoculations: Flue, Rhino, Dental Care, and other v	ret-recommended vaccinations for endemic diseases.			
Illness/Injury: The adopter agrees to provide recommended vet care f				
and/or according to requirements of County and/or State of law.				
10. The adopter agrees to forward a vet's statement of the horse's re-				
time of spring and fall inoculations OR upon request.	sidenties, condition, weight, tooth, and need condition at the			
11. Horses can experience injuries or illness while in an adopter's car	re. Adopter understands and agrees that any and all injuries			
will be identified and treated while in placement, with financial responsibility being solely the adopter's responsibility. Failure to				
provide immediate medical treatment when needed will result in actio				
notifying ASAP Inc. by phone or email immediately. In the event of the death of a horse, adopter is REQUIRED to submit a death				
statement signed by attending veterinarian. Please initial here to verify your understanding of this requirement:				
12. Horses placed by ASAP Inc. include no guarantees pertaining to general condition, temperament, or soundness. Please be				
aware of this condition prior to adopting a horse. Initial here to verify the				
and of the condition prior to adopting a notice militariore to rolling t				
If the adopter fails to comply with any of the condition	ns or stinulations set here ASAP Inc			
reserves the right to regain possession of the horse.				
representative of ASAP Inc. to visit the stabling prop				
adopter also agrees to allow ASAP Inc. to return a ho				
horse is determined by ASAP representatives to be t				
noise is determined by ASAI Tepresentatives to be t	meateneu.			
By signing holow I cortify that I have read and accort the terms	conditions, and stimulations that nortain to the			
By signing below, I certify that I have read and accept the terms, conditions, and stipulations that pertain to the				
adoption and placement of a horse from ASAP, Inc. I understand that these terms, conditions, and stipulations apply				
to the horse (or horses) that will be listed in Part Two of this form at the time of placement. A copy of this agreement				
will be sent to you after an adoption has taken place.				
	[ <b>-</b> .			
Applicant Signature:	Date:			
<del>-</del>				
A Record of Constitute Classics (C. 1, 40, 5, 5)	Date:			
Parent or Guardian Signature (if under 18 years of age)	Dutc.			

COMPLETE PART ONE AND SEND WITH APPLICATION FEE TO:

Susan Wellman, ASAP Director S 6039 A Pedretti Lane De Soto, WI 54624

Part Two: Horse Information				
	pleted at time of placement			
Date of Placement:	·····			
Horse Name:	Adoption Fee:			
Age:	Payment Method:			
Sex:	Tattoo Number:			
Special Terms and Conditions, If Any:				
I accept this horse under my care "as is" and agree to the above. Should I need to return this horse to the program adoption fee I have paid, which may be put toward the acrealize adoption fees help defray the costs of adoption senot constitute purchase of the horse but rather adoption we Please Initial Here	within the next 14 days, I understand I will received doption of another horse only (no credit after this exervices (e.g. boarding, transportation, training, place	e credit for the xchange period). I		
Adopter's Full Name (please print):				
Adopter's Signature:		Date:		
Parent or Guardian Signature (if under 18 years o	f age):	Date:		
Authorized ASAP Representative Signature:		Date:		

American Standardbred Adoption Program Inc.

S 6039 A Pedretti Lane
De Soto, WI 54624
(608) 689-2399
asapinc@mwt.net -- http://www.4thehorses.com