

# EQUINE ADOPTION APPLICATION

Date \_\_\_\_\_

If any, name of staff who spoke with you \_\_\_\_\_

*Please return this **completed application** to Haven for Horses. Any questions please call (760) 217-7717 or email **haven4horsesrescue@gmail.com***

## **Adopter Information:**

Name \_\_\_\_\_ Email (if any) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

Zip Code \_\_\_\_\_ Cell (\_\_\_\_\_) \_\_\_\_\_

Driver's License Number \_\_\_\_\_

Current Employer \_\_\_\_\_,

Phone (\_\_\_\_\_) \_\_\_\_\_ Do you work • Full time? • Part time?

What is your annual income? \_\_\_\_\_,

Annual household income? \_\_\_\_\_

## **Equine Requirements:**

Application for: • Horse • Pony • Miniature Horse • Donkey • Mule

Is there a specific animal at Haven for Horses that you are interested in?

\_\_\_\_\_

What level of training would you prefer the equine to have?

• Untrained • Started • Green • Moderate Experience • Well trained

What riding discipline is your primary focus? \_\_\_\_\_

How often will the equine be ridden/driven? \_\_\_\_\_

What is your overall goal for your adopted equine? \_\_\_\_\_

## **Rider Information:**

How long has the primary rider been riding? \_\_\_\_\_

What is the primary rider's current riding discipline? \_\_\_\_\_

Please select the most appropriate skill level of the primary rider:

- Beginner – very little, if any, experience riding/handling horses
  - Advanced Beginner – able to apply basic aids, comfortable at walk & posting trot
  - Intermediate – confident riding walk, trot, and canter on a quiet, reliable mount
  - Advanced Intermediate – can W/T/C regularly, jump a course, can communicate with horse effectively
  - Advanced – confident, independent seat, soft hands, can handle a spirited horse
  - Trainer – highly skilled, can start & finish horses, can handle young/difficult horses
- Does the primary rider work with a trainer or riding instructor? If yes, please tell us who:

Name: \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

If currently riding, how often?

- Daily • 4-6 times weekly • 2-3 times weekly • About once a week • Weekends only
- 1-2 times monthly • Seldom

If there are any, at what level are secondary riders?

- Beginner – very little, if any, experience riding/handling horses
- Advanced Beginner – able to apply basic aids, comfortable at walk & posting trot
- Intermediate – confident riding walk, trot, and canter on a quiet, reliable mount
- Advanced Intermediate – can W/T/C regularly, jump a course, can communicate with horse effectively
- Advanced – confident, independent seat, soft hands, can handle a spirited horse
- Trainer – highly skilled, able train horses from untrained to fully rideable, can handle young and/or difficult horses

Do the secondary riders work with a trainer or riding instructor? If yes, please tell us who: Name: \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Please estimate the largest rider's height \_\_\_\_\_ weight \_\_\_\_\_

## **Facility Information:**

Where will this animal be living? • Boarding facility • Private residence  
Address \_\_\_\_\_

Who owns this property? \_\_\_\_\_ Please list phone number \_\_\_\_\_

\_\_\_\_ What is the approximate size of the turn-out area?

\_\_\_\_ What type of fencing is used?

What will be used for shelter? • stall • run-in shed • other shelter \_\_\_\_\_

**Cost & Care:**

How will the regular cost of this animal be covered?

\_\_\_\_\_ How much do you anticipate spending yearly on the following items:

Grain/hay/supplements \_\_\_\_\_

Veterinary care \_\_\_\_\_

Dental, Farrier, Worming \_\_\_\_\_

Who will be responsible for these costs? \_\_\_\_\_

Who will be handling this animal on a daily basis for feeding, watering, and turning out?

\_\_\_\_\_

Who will care for the animal when you are unavailable to do so (vacation, illness, etc.)?

\_\_\_\_\_

\_\_ Please list the farm animals you currently own or have owned within the past 5 years.

| Species/Breed | Age | Sex | Neutered? | If no longer owned, what happened to the pet? |
|---------------|-----|-----|-----------|---|
|               |     |     |           |   |
|               |     |     |           |   |
|               |     |     |           |   |
|               |     |     |           |   |
|               |     |     |           |   |

Which veterinarian will you use for equine care?

Name \_\_\_\_\_

Phone number (\_\_\_\_\_) \_\_\_\_\_

What farrier do you intend to use for this animal?

Name \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_

Have you ever adopted from Haven for Horses before? • Yes • No

If yes, what did you adopt? \_\_\_\_\_

Please be sure that you have filled out each question thoroughly and honestly. This information will be used to help provide you with the best possible equine match.

**By signing, I affirm that I am 21 years of age or over, and the information contained on this form is true, to the best of my knowledge. I understand that if I am approved for adoption, I will be required to make a substantial commitment of time and money for up to 30 years for my new animal.**

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Signature

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Date

### **Steps For Equine Adoption:**

1. Return completed equine adoption application form to the Equine Manager.
2. If a suitable animal becomes available, all qualified parties will be notified.
3. Make an appointment to work with the animal, both on the ground and under saddle.
4. Schedule a home visit to be completed by a staff member to wherever the animal will be kept.
5. If potential adopter and the staff at Haven for Horses are comfortable, the adoption is approved.

\*Pre-purchase exams by your veterinarian are encouraged, at your cost.

## **Release For Veterinary Information**

In order for your veterinarian to release information regarding the care of the farm animals in your possession, we request that you fill out this form. It is not filled out by your veterinarian. Please be sure to sign it and return it to Haven for Horses along with your adoption application. This information will only be used when considering the eligibility of candidates interested in adoption.

I give my veterinarian, Dr. \_\_\_\_\_ permission to release information concerning the veterinary care of my animals to Haven for Horses. I understand this information is only for the purpose of considering my eligibility for adopting animals from Haven for Horses.

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

Print name: \_\_\_\_\_

