



Hooker Ranch Equine Refuge
5661 N Farm to Market Road
Winnsboro, TX 75494
EID 88-1621574 | HookerRanch.org

Equine Surrender Agreement

Name: _____ Date: _____

Address: _____ Email: _____

City, State and Zip: _____ Phone # _____

Driver's License # _____ State _____

Do you have proof of ownership? _____ What proof can you provide? _____

Equine's Name, Registration, or Brand: _____

Breed: _____ Age: _____ Sex: _____

How long have you owned this equine? _____

Equine's Previous Use: _____

Has this equine had any type of surgery? _____ Yes _____ No _____ Unknown

If you answered yes, please list the type of surgery. _____

Does this horse have any lameness issues? _____ Yes _____ No _____ Unknown

If you answered yes, please describe. _____

Current Vet: _____ Phone: _____

Current Ferrier: _____ Phone: _____

If equine is a mare, is there a possibility she could be pregnant? _____ Yes _____ No _____

Please describe the equine's riding history.

Please describe the equine's temperament, soundness and any habits about which Hooker Ranch and its adopters should know.

Does this equine's temperament, soundness or habits pose any danger to those riding or handling it (e.g. bites, kicks, rears, bucks shies at vehicles, will not trailer without tranquilizer, etc.)? _____ Yes _____ No _____ Unknown

Has this equine ever injured anyone? _____ Yes _____ No _____ Unknown



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If you answered yes to either of the two previous questions, please explain in full detail (attach additional sheet if necessary).

Is this equine a cribber? _____ Yes _____ No _____ Unknown

Please list dates of equine's last vaccinations, worming, hoof and dental care.

Coggins	_ Neg. _ Pos.	Date _____	Unknown	E	&	W
Encephalomyelitis	Date _____	Unknown	Tetanus	Date _____		
Unknown						
Rhino-Flu		Date _____		Unknown		
Rabies		Date _____		Unknown		
West Nile		Date _____		Unknown		
Botulism		Date _____		Unknown		
Worming						
Product:	_____	Date _____		Unknown		
Hoof Care		Date _____		Unknown		
Dental Care		Date _____		Unknown		

To the best of my knowledge, the above information about the equine's riding history, temperament, and medical treatment is true and correct.

 Owner's signature

 Date

Surrender Donation:

Will you be making a tax-deductible donation to help cover the costs of caring for this equine while it is at Hooker Ranch? _____ Yes _____ No

If yes, the tax-deductible donation is in the amount of \$ _____



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Having sole ownership of the above equine, I/we hereby surrender the equine _____, registration/brand: _____ to Hooker Ranch and thereby relinquish all ownership in this animal.

I understand that Hooker Ranch, will not be responsible for any financial obligations incurred by me on behalf of this equine prior to its surrender to Hooker Ranch.

Should Hooker Ranch find a suitable home for this equine, I understand that I am consenting to the adoption/fostering of the equine by an individual/organization approved by Hooker Ranch.

I understand and agree that I am transferring full legal ownership of my equine to Hooker Ranch and Hooker Ranch has full authority for all necessary veterinarian procedures including euthanasia.

By submitting this application, I understand that this decision is final and I will be giving up all rights and interest in this animal. I understand that all adoptions and outcomes are confidential.

Owner Signature **Printed Name** **Date**

Owner Signature **Printed Name** **Date**

Owner Signature **Printed Name** **Date**

Copy of proof of ownership attached? _____

Office Use only: _____

Accepted by: _____ **Comments:** _____

