



## 2024 ADOPTION APPLICATION

All persons interested in adopting a horse from the Equine Rescue of Aiken are required to complete this application in full. Once completed, please drop off your application at the Rescue office, mail it to the Rescue, or email the application to: [aikenequinerescue@gmail.com](mailto:aikenequinerescue@gmail.com).

Applications will be reviewed, and references contacted before scheduling a meet and greet. There will be a processing fee of \$25.00. We accept payment by check \_\_\_\_, money order \_\_\_\_, or cash \_\_\_\_\_. (*Your application will only be processed after payment is received.*)

*All adopters must be 21 years old or older and be financially and physically able to provide the proper care to the adopted horse. If you are under 21 years old, please include "parent information" in the Personal and Financial sections of this application.*

Any adopters that will be first-time horse owners must follow these guidelines:

- A. The horse must stay at the Equine Rescue of Aiken for the first 3 months for an extended trial period where the adopter and horse will be monitored and re-evaluated for compatibility.
- B. An established trainer must be involved with the adopter and horse for at least the first 6 months of ownership.
- C. After the 3-month trial period, the horse must be kept at a boarding facility with a knowledgeable equine manager.
- D. A young and/or green horse will not be adopted to first-time horse owners unless A. and B. guidelines are followed.

Decisions will be made on a case-by-case basis.

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

Name of Horse/s interested in: \_\_\_\_\_

### PERSONAL INFORMATION (Owner/Rider)

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

## CONTACT INFORMATION

Home Address: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

## FINANCIAL INFORMATION

Employer: \_\_\_\_\_

Employer Phone Number \_\_\_\_\_

Occupation: \_\_\_\_\_

Full-Time: \_\_\_\_\_ Part-Time: \_\_\_\_\_ Self-Employed: \_\_\_\_\_

How long have you been at your current job? \_\_\_\_\_

If employed at current job less than a year what was your last job and how long where you there? \_\_\_\_\_

If Self-Employed, please describe your profession:

\_\_\_\_\_

What is your household's total annual income (circle one):

Under \$35K	\$35K-\$45K	\$46K-\$60K	\$61K-\$75K	\$76K-\$100K	\$100K & Up
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Will there be anyone helping you to pay for the care of the horse? Yes \_\_\_ No \_\_\_ If yes, please explain: \_\_\_\_\_

How much do you estimate it will cost, per year, to own your adopted horse? \$\_\_\_\_\_.00

Please explain: \_\_\_\_\_

## HORSE EXPERIENCE AND HISTORY

What is your experience with horses? \_\_\_\_\_

Have you owned a horse before? Yes \_\_\_ No \_\_\_ If yes, when was the last time you owned a horse? \_\_\_\_\_

Do you currently own a horse? Yes \_\_\_ No \_\_\_ If yes, how many? \_\_\_\_\_

Please list the breed of each horse you own:

_____	_____
_____	_____

Style of riding/driving that you practice: \_\_\_\_\_

How many years? \_\_\_\_\_

What breeds have you handled and ridden? \_\_\_\_\_

Have you ever trained a young or green horse? Yes \_\_\_ No \_\_\_ If yes, did you receive help from a professional trainer or did you do it on your own? Please specify: \_\_\_\_\_

What is your experience training a young or green horse? \_\_\_\_\_

Have you ever sold a horse? Yes \_\_\_ No \_\_\_ If yes, please explain: \_\_\_\_\_

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Are you still in contact with the person(s) you sold the horse to? Yes \_\_\_ No \_\_\_

Are you considering a mare for breeding purposes? Yes \_\_\_ No \_\_\_

If yes, what is your experience with breeding and foaling: \_\_\_\_\_

How many mares have you bred and foaled? \_\_\_\_\_

## YOU AND YOUR POTENTIAL ADOPTION HORSE

Why do you want to adopt? \_\_\_\_\_

Have you ever adopted before? Yes/No If yes from where? \_\_\_\_\_

Do you prefer a certain breed? \_\_\_\_\_

What qualities would you like to have in a horse (e.g., age, color, sex, size, temperament)? \_\_\_\_\_

What style and level of riding do you wish to achieve? \_\_\_\_\_

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

Are you willing to change your discipline goals to suit your adopted horse's needs? Yes \_\_\_ No \_\_\_

How often do you want to ride/drive your horse?

Daily \_\_\_ Weekends Only \_\_\_ 4-6 Times Weekly \_\_\_ 2-3 Times Weekly \_\_\_ 1-2 Times  
Weekly \_\_\_ Monthly \_\_\_ Seldom \_\_\_ Never (companion horse only) \_\_\_

How would you rate your riding ability?

Beginner \_\_\_ Novice \_\_\_ Intermediate \_\_\_ Advanced \_\_\_

Do you have a trainer? Yes \_\_\_ No \_\_\_ If yes, please provide his/her name and contact information:

Does your trainer have experience working with young or green horses? Yes \_\_\_ No \_\_\_ If yes, how many years? \_\_\_\_\_

Will there be anyone else riding the horse? Yes \_\_\_ No \_\_\_ If Yes, explain their experience:

What would be your overall goal for the horse? (Showing, dressage, companion, trail, western, hunter jumper, etc.) ? \_\_\_\_\_

If you have an unforeseen life event (e.g., loss of job, divorce, illness, pregnancy) what would your plan be for your adopted horse? \_\_\_\_\_

When would you like to adopt? \_\_\_\_\_

Are you interested in a specific horse? \_\_\_\_\_

## BOARDING OR PRIVATE FACILITY INFORMATION

Please provide the name, address, and phone number of the boarding facility or private farm where the horse will stay: Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Who owns the facility? \_\_\_\_\_

Do you live at the facility? Yes \_\_\_\_ No \_\_\_\_

Do you currently board at this facility or have you in the past? Yes \_\_\_\_ No \_\_\_\_ Please specify:

Will the manager/owner of the stable be willing to sign our "Boarding Agreement"? This form states that they will contact the Equine Rescue of Aiken about late board payment or improper horse case.

Yes \_\_\_\_ No \_\_\_\_

If you DO NOT live at the facility, what is the monthly board fee: \$ \_\_\_\_\_

What does it cover? \_\_\_\_\_

If you DO live at the facility, what do you anticipate paying a month to care for the horse?

\$ \_\_\_\_\_.

How many horses are currently at the facility? \_\_\_\_\_

Will the horse have a stall or run-in? What are the exact dimensions?

Stall: \_\_\_\_\_ Size: \_\_\_\_\_ Run-In: \_\_\_\_\_ Size: \_\_\_\_\_

How many stalls are in the barn? \_\_\_\_\_

If your horse will have a stall, how many hours per day do you plan to have him/her stalled?

\_\_\_\_\_ hours per day.

How often and how many hours per day will your horse be turned out? \_\_\_\_\_ hours per day.

Who will be responsible for turning out your horse?

Does the facility have pasture(s)? Yes \_\_\_\_ No \_\_\_\_ If yes, how many acres? \_\_\_\_\_

What type of fencing surrounds the pastures/paddocks? Explain in detail (type of material, number of rails/strands, height) \_\_\_\_\_

How many other horses will the horse be turned out with? \_\_\_\_\_ Are mares and geldings kept separate or mixed? \_\_\_\_\_

## CARE & FEEDING INFORMATION

How many times per day will your adopted horse be fed? \_\_\_\_\_

Please explain: \_\_\_\_\_

Who will be responsible for feeding the horse? \_\_\_\_\_

Where will the horse be fed? Stall \_\_\_\_\_ Pasture \_\_\_\_\_

If fed in the pasture, how will you assure the horse is receiving the proper and required amount of feed? \_\_\_\_\_

What type of grain and hay will the horse be fed? \_\_\_\_\_

Based on your experience, how much grain and hay per day do you think the horse will need?

\_\_\_\_\_

Will your horse have access to grass pasture? Yes \_\_\_\_ No \_\_\_\_

How often will you de-worm your adopted horse? \_\_\_\_\_

What annual vaccinations will your horse receive? Please list: \_\_\_\_\_

\_\_\_\_\_

What is your planned farrier schedule? (frequency) \_\_\_\_\_

What is the name and phone number of your farrier? \_\_\_\_\_

\_\_\_\_\_

## REFERENCE INFORMATION

Please provide the name and contact information for the veterinarian that has been to the facility where the horse will be kept.

*The veterinarian office must have you or your boarding facility as a current client. Please specify who the current client is.*

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Fax: \_\_\_\_\_

Provide the name and phone number of 2 PROFESSIONAL NON-FAMILY references that are experienced with horses and are aware of your horse experience and have been to the facility:

1) Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Verified By: \_\_\_\_\_ Date: \_\_\_\_\_

2) Name \_\_\_\_\_ Phone: \_\_\_\_\_

Verified By: \_\_\_\_\_ Date: \_\_\_\_\_

How did you hear about our program? Please specify: \_\_\_\_\_

\_\_\_\_\_

Please provide 2 PERSONAL references; one family member and one nonfamily member.

1) Name \_\_\_\_\_ Phone: \_\_\_\_\_

Verified By: \_\_\_\_\_ Date: \_\_\_\_\_

2) Name \_\_\_\_\_ Phone: \_\_\_\_\_

Verified By: \_\_\_\_\_ Date: \_\_\_\_\_

## ADOPTION CONTRACT INFORMATION

Have you read the "Adoption Contract" and agree to the terms and rules governing adoptions from the Equine Rescue of Aiken? Yes \_\_\_\_ No \_\_\_\_

Do you understand and agree that the adopted horse is **NEVER**, under any circumstances, to be raced, sold at any auction, sold to a horse dealer or sold to the Amish? Yes \_\_\_\_ No \_\_\_\_ *The Equine Rescue of Aiken reserves the right to pursue legal action towards the adopter should this occur.*

BY SIGNING OR TYPING YOUR FULL NAME BELOW, YOU CERTIFY THAT ALL OF THE INFORMATION YOU HAVE PROVIDED ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF YOUR KNOWLEDGE.

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