**THE HORSE PROJECT**

**“Interested in Adoption” Application**

***The details in this Application will help us select a horse that might be a good match for you.*** If we don't have the right horse, please answer below if we may share this application with other rescues and sanctuaries to see if they do. If they believe they have a horse that fits, you will be contacted and receive information about the horse. This does not guarantee adoption.

***\*(Please answer this search area question)\****

**No, I only want an equine from your organization**

**Yes: *If yes, please indicate one of the following:***

Only within ***[Type here]*** hours’ driving distance

All organizations within a network of California rescues and sanctuaries

California network rescues and sanctuaries as well as contacts in nearby states

Each rescue and sanctuary has their own adoption agreement and steps to adoption. Remember that you will need to meet the horse in person before an adoption is completed. We do not certify, inspect or guarantee or warranty other rescues and sanctuaries or their horses. We share this information in the hopes that a horse in need will find a loving, caring home.

Please take the time and do your own work to make sure that the horse and the organization are a good fit for you and meet *your*requirements. It is good to ask questions, carefully read the adoption agreement, learn about the organization and spend time with the horse. A pre-purchase exam by your veterinarian is always recommended.

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| **Your Contact Information** | | |
| NAME  *[Type here]* | ADDRESS  *[Type here]* | |
| EMAIL  *[Type here]* | PHONE  *[Type here]* | APPLICANTS MUST BE 18 YRS OR OLDER  **Are you 18 years or older? No Yes** |
| WILL YOU HAVE A CO-ADOPTER?  **No Yes:** Reason for co-adoption:*[Type here]* | | |
| CO-ADOPTER NAME  *[Type here]* | CO-ADOPTER ADDRESS  *[Type here]* | |
| CO-ADOPTER EMAIL  *[Type here]* | CO-ADOPTER PHONE  *[Type here]* | CO-ADOPTER RELATIONSHIP AND ARRANGEMENT  *[Type here]* |

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| REASON FOR ADOPTING  *[Type here]* | | | | | | |
| **Your Equine Preferences & Goals** | | | | | | |
| **Horse Donkey Mule Miniature Horse** | | | | | | |
| GENDER  **Female Male Either** | AGE  *[Type here]* | BREED(S)  *[Type here]* | OTHER PREFERENCES  *[Type here]* | | DESCRIBE YOUR IDEAL EQUINE  *[Type here]* | |
| DESIRED SKILLS / LEVEL OF EQUINE  **Halter broke Started ground training Started under saddle**  **Rideable Kid safe Other:** *[Type here]* | | WHAT ARE YOUR GOALS FOR YOUR EQUINE?  **Riding** *(complete next section as well)*  **Competition**  **For kids**  **Lead line with grandkids**  **Companion**  **Equine-assisted therapy (NOT ridden)**  **Therapeutic riding**  **Carriage driving**  **Other:** *[Type here]* | | RIDING PLANS & PREFERENCES  Describe the kind of riding you will do:  *[Type here]*  # times per week you expect to ride:  *[Type here]*  For how long each ride:  *[Type here]*  Do you love riding fast? **No Yes** | | ARE YOU WILLING TO HIRE A TRAINER TO:  Help an equine meet your goals?  **No Yes**  Improve an equine’s manners?  **No Yes** |
| Would you be willing to consider adopting an equine with special needs or limitations? **No Yes Maybe**  If YES or MAYBE, describe what you WOULD and WOULDN’T accept *(example; regular medication, can’t canter, has “off” days, etc.):*  *[Type here]* | | | | | | |
| What are your “deal breakers”?  *[Type here]* | | | | | | |

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| **Your Equine Experience** |
| Have you owned an equine before? **No Yes—Which kind(s): Horse Donkey Mule Mini**  Do you own equines now? **No Yes—How many?** *[Type here]*  If you’ve never owned an equine, what is your equine interactions / experience?*[Type here]* |

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| **Your Equine’s Environment – Location** *(complete one of the three sections below)* | | | | |
| **1—Boarding Facility**  Spot is open/ being held  On waiting list—approx. wait time**:**  *[Type here]* |  | **2—Property owned by you**  Same address as application  Different address *(add below)*: |  | **3—Someone else’s property**  Have they agreed to have an equine on the property?  **Yes No—Explain:** *[Type here]*  Does the property meet local regulations for equines?  **Yes No— Explain:** *[Type here]* |
| FACILITY NAME  *[Type here]* | ADDRESS OF YOUR OTHER PROPERTY  *[Type here]* | CONTACT NAME  *[Type here]* |
| FACILITY ADDRESS  *[Type here]* | PHONE  *[Type here]* |
| FACILITY CONTACT NAME  *[Type here]* | ADDRESS  *[Type here]* |
| FACILITY PHONE  *[Type here]* |
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| How many other equines are kept at the location?*[Type here]* | | | | |

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| **Your Equine’s Companions** |
| **GUIDELINES FOR COMPANIONSHIP**  At least one other equine *(horse, donkey, mule, or miniature)* must be present as a companion for any adopted equine. Goats, sheep, and other farm animals **are not considered adequate companions**. Equines must minimally be able to socialize over a fence line.  What companion equines will be present?  *[Type here]*  Do you affirm that all companion equines are and will be kept in good health, current on vaccines, and receive adequate veterinarian, dental, and hoof care?  **Yes No—**Explain:*[Type here]* |

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| **Additional Information / Questions** |
| What other information will help us make a good match?  *[Type here]*  What questions do you have for us?  *[Type here]* |

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| **Certification** | | |
| *I certify that all of the Application information above is complete and true. I understand that falsifying information may result in nullifying this Application. If any information in this Application changes during the adoption process, I will notify this initiating organization or the subsequently referred organization(s) immediately.* | | |
| **SIGNATURE (Insert jpeg of signature if possible, or send phone photo of page)** | **PRINTED NAME**  *[Type here]* | **DATE**  *[Type here]* |