

ADOPTION OR FOSTER APPLICATION

ATTACH PICTURES OF FACILITY & \$25 NON REFUNDABLE APPLICATION FEE (PD CK #_____ or cash____)

Horse's Name you are applying for:

| WHAT TYPE OF APPLICATION ARE YOU SUBMITTING? (C | HECK ONE) |
|---|-----------|
|---|-----------|

- □ X ADOPTION
- □ OFF SITE FOSTER
- □ ON SITE FOSTER

APPLICANT INFORMATION

| FIRST NAME: | LAST NAME: | | | | |
|-------------|------------|--------|---------|---------|--|
| BIRTH DATE: | GI | NDER: | HEIGHT: | WEIGHT: | |
| ADDRESS: | | | | | |
| CITY: | | STATE: | | ZIP: | |
| PHONE #: (| _) | E-N | /AIL: | | |

PARENT/LEGAL GUARDIAN INFORMATION (UNDER AGE 18)

| NAME(S) OF PARENT/LEGAL GUA | RDIAN: | | |
|-----------------------------|------------|------|--|
| ADDRESS: | | | |
| CITY: | STATE: | ZIP: | |
| PHONE #: () - | PHONE #: (|) - | |

HORSE EXPERIENCE (CHECK APPROPRIATE BOX)

- □ NON-EXPERIENCED
- BEGINNER
- □ INTERMEDIATE
- □ ADVANCED
- □ PROFESSIONAL

BRIEFLY EXPLAIN YOUR HORSE EXPERIENCE:

NUMBER OF YEARS EXPERIENCE WITH HORSES: ______ RIDING DISCIPLINE(S): _____

LIST ANY EQUINE RELATED MEMBERSHIPS/CERTIFICATIONS/AWARDS THAT YOU HAVE:

OTHER

EXPLAIN WHY YOU WANT TO ADOPT OR FOSTER A HORSE FROM FHHR:

HAVE YOU HAD PREVIOUS EXPERIENCE AS AN ADOPTER OR FOSTER OF ANY ANIMALS? WHEN? FROM WHERE?:

HAVE YOU EVER BEEN CONVICTED OF A CRIME RELATED TO ANIMAL CRUELTY OR ABUSE OF ANY KIND?

IF "YES", PLEASE EXPLAIN AND GIVE DATE OF CONVICTION:

*DUE TO THE NATURE OF OUR ORGANIZATION WE HAVE TO BE AWARE OF ANY HISTORY INVOLVING ABUSE OR ANIMAL CRUELTY TO ENSURE THE SAFETY OF THE ANIMALS. A BACKGROUND CHECK WILL BE REQUIRED.

REFERENCES (PLEASE PROVIDE THE NAME, PHONE # AND EMAIL OF 3 PERSONAL/PROFESSIONAL REFERENCES. THEY SHOULD HAVE A KNOWLEDGE ABOUT YOUR EXPERIENCE WITH HORSES AND SHOULD KNOW YOU FOR LONGER THAN ONE YEAR - ONLY ONE FHHR VOLUNTEER REFERENCE PERMITTED)

HORSE INFORMATION

NAME(S) OF HORSE(S) YOU ARE APPLYING FOR: EXPLAIN WHY ARE YOU APPLYING FOR THE ABOVE HORSE(S):

| HOW OFTEN WILL YOU HAVE THE ABOVE HORSE(S) DE-WORMED? | |
|--|-------|
| HOW OFTEN WILL YOU HAVE THE ABOVE HORSE(S) TREATED BY THE FARE | RIER? |
| VET? EQUINE DENTIST? | |
| (PROVIDE NAME & PHONE NUMBER OF EACH) | |
| FARRIER: | _ |
| VET: | |
| EQUINE DENTIST: | _ |

PROPERTY INFORMATION: (CHECK ONE. - ON SITE FOSTER APPLICANTS CAN SKIP THIS SECTION.) *PLEASE SUBMIT PICTURES OF FENCING, PADDOCK/PASTURE, SHELTER(S)/STALL(S), WATER SOURCE & OTHER AREAS OF PROPERTY WHERE THE HORSE(S) WILL BE LIVING WITH THIS APPLICATION.

- □ MY PROPERTY
- BOARDING FACILITY

IF "BOARDING", PLEASE GIVE NAME OF FACILITY, ADDRESS, PHONE NUMBER, & NAME OF OWNER:

WHO WILL BE RESPONSIBLE FOR THE DAILY CARE & FEEDING OF THE ABOVE HORSE(S)?

WHAT TYPE OF HAY/FEED WILL YOU USE?_____ HOW OFTEN WILL YOU GIVE HAY/FEED TO THE ABOVE HORSE(S)? WHAT IS THE APPROXIMATE SIZE OF THE HORSE(S) TURN OUT AREA?

WHAT TYPE OF TURN OUT AREA IS IT? (CHECK WHICH APPLY)

- GRASS
- DRY LOT

WHAT IS THE TURN OUT PROCEDURE? (CHECK WHICH APPLY)

- 24/7 TURN OUT
- □ STALLED DURING DAY OR NIGHT
- □ STALLED DURING INCLEMENT WEATHER/INJURY
- OTHER:

HOW MANY OTHER HORSES WILL BE IN THE TURN OUT AREA WITH THE ABOVE HORSE(S)?

WHAT TYPE OF SHELTER WILL THE ABOVE HORSE(S) HAVE ACCESS TO? (CHECK ALL THAT APPLY & DESCRIBE SIZE AND TYPE OF FLOORING/BEDDING USED IN "DESCRIPTION" AREA)

- □ STALL
- □ RUN-IN SHED
- OTHER: _____

DESCRIPTION:

WHAT TYPE OF FENCING IS USED FOR THE ABOVE HORSE(S) TURN OUT AREA? (CHECK ALL THAT APPLY & PROVIDE DESCRIPTION IN "DESCRIPTION" AREA)

- U WOOD
- □ VINYL/PLASTIC
- □ WIRE/ELECTRIC
- OTHER: ______

DESCRIPTION:

DO YOU HAVE ACCESS TO ANY OF THE FOLLOWING: (CHECK ALL THAT APPLY)

- ROUND PEN
- OUTDOOR ARENA
- INDOOR ARENA
- TRAILS

I ACKNOWLEDGE THAT ALL STATEMENTS ON THIS DOCUMENT ARE TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE & THAT I HAVE READ AND UNDERSTAND THE CONTENTS OF PROVIDED ADOPTION/FOSTER PROCEDURE & GUIDELINES.

SIGNATURE ______ DATE_____

THANK YOU! YOU WILL HEAR BACK FROM US SOON ON THE STATUS OF YOUR APPLICATION. NORMAL PROCESSING TIME IS 2 WEEKS.