



EQUINE ADOPTION APPLICATION

Horses Without Humans Rescue Organization (HWH) requires that this application be completed in full and submitted prior to the approval of adoption of any equine. Submission of an application does not guarantee adoption of any animal to any person regardless of the date of submission, previous conversations with HWH staff or representatives, or previous knowledge of the animal. HWH reserves the right to place animals in its care into adoptive homes in its sole and absolute discretion. The adoption application is a part of the adoption process. Additional steps may be required for approval. All adopters must be 18 years of age or older. It is understood that adults may wish to adopt for persons under the age of 18. If the adoption is approved, the adult will be fully responsible for care of the adopted equine.

Providing false information will result in a denial of the application and any future adoption applications.

Please return the application via mail or bring with you to your appointment

Dumb Friends League Harmony Equine Center, 5540 E. State Highway 86, Franktown, CO 80116

PERSONAL INFORMATION			
Full Name:		Date of Birth:	
Address:			
City:	County:	State:	Zip:
Mailing address (if different from above):			
City:	County:	State:	Zip:
Driver's License/State ID Information		State:	#:
Home Phone:	Cell Phone:		
Place of Employment:		Occupation:	
Work Phone:	Email:		
Why do you want to adopt an equine?			
How did you hear about the Horses Without Humans?			
Have you ever been issued a citation, warning or been convicted of animal cruelty?		Yes	No
If yes, please explain:			
EQUINE EXPERIENCE			
What is your level of riding/equine experience?			
<input type="checkbox"/> Beginner: Rider is new around equines. Comfortable riding at a walk. <input type="checkbox"/> Advanced Beginner: Comfortable at a walk and trot, some experience with faster gaits. <input type="checkbox"/> Intermediate: Comfortable at all gaits, can handle equines that test a rider. <input type="checkbox"/> Advanced: Comfortable handling difficult equines in various situations and environments. <input type="checkbox"/> Very Advanced: Has previous experience training equines or experience handling green equines.			

EQUINE EXPERIENCE (CONT.)

Have you ever owned an equine? Yes No

If yes, how many and explain their uses:

How many equines do you currently own?

What style of riding or driving do you practice?

FACILITY OR BOARDING INFORMATION

Will the equine be stabled on your property or boarded out?

If kept on your property:

What is the number of acres where the equine will be pastured?

What kind of shelter do you have (barn/stalls, loafing shed, windbreaks, etc.)?

What kind of fencing do you have?

What is the total number of equines on this property?

If the equine is to be boarded on someone else's property:

Name of boarding stable:

Owner:

Address:

City:

County:

State:

Zip:

Phone:

Have you boarded an equine at this facility before? Yes No

What type of boarding will be done (group pasture, stall, etc.)?

What type of fencing does the stable have?

ADDITIONAL QUESTIONS (Answers will assist us in making the best placement possible.)

Is there a specific equine you want to adopt? Yes No

If so, please describe the equine:

What purpose do you intend for the equine you want to adopt?

Owning an equine may cost \$2,000 to \$3,000 or more per year for care (feed, veterinarian, farrier, board, etc.).

Are you willing and able financially to provide for the equine? Yes No

Will anyone be helping you pay for the care of the adopted equine? Yes No

If so, explain who and why:

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ADDITIONAL QUESTIONS (cont.)

Have you sold or given away any equines in the past five years? Yes No

If yes, why and to whom?

What breed, size and gender would you prefer?

What type of equine do you wish to adopt?

- Experienced: Calm, gentle, minimal handling issues. Could potentially be handled by a child or beginner.
- Inexperienced or Green: Has had inadequate training, but has good manners and is willing to please.
- Untrained: May never have been adequately handled or broke, or may be young.

REFERENCES

It is our practice to contact references. These include personal acquaintances, veterinarians and farriers. Please provide the names and phone numbers of two references (excluding relatives). We prefer references that are experienced with equines and that are also aware of your equine experience.

REFERENCE #1

Name:

Phone(s):

REFERENCE #2

Name:

Phone(s):

Do you currently have an equine veterinarian? Yes No If yes, please provide:

Name:

Clinic:

Phone:

Do you currently have a farrier? Yes No If yes, please provide:

Name:

Phone:

I attest that all the information in this application is true to the best of my knowledge.

Signature of Applicant:

Date: