

Voice For Horses Rescue Network, Inc PO Box 566 Toledo, Ohio 43697 419-350-4195

www.voiceforhorses.org

Adopted Horse Relinquishment Form

A.	General Information (All fields must be completed. If non-applicable, enter n/a.) Name					
	Address			ate, Zip		
	Home Phone					
	Email Address		Alterna	te Email		
В.	Equine Information (All fields must be completed. If non-applicable, enter n/a.) Equine Name					
	Breed	Color, Ma	rkings, B	rands, etc		
	Date of Adoption:	D	ate of Re	et <mark>urn:</mark>		
	Current negative Coggins?	(circle one)	Yes No	Current Vaccinat	ions? (circle one) Yes No	
	Note: Current Coggins form and records of vaccinations must be attached.					
	Current equine worming	program: _	L'an			
	Current Feeding Program:					
	Veterinarian's Name:			Phone Number	:	
	Reason for Return:	00411		Lotwa		

I, the undersigned, agree to relinquish all ownership, rights and interest in the above referenced equine to Voice For Horses Rescue Network. I certify that no claims or liens exist against said equine to the best of my knowledge. However, if any claims or liens were placed on the equine while in my custody, I assume full responsibility for such and will not hold VFHRN liable. If legal proceedings are initiated against myself or VFHRN arising from my custody or care of said equine, I agree to assume full responsibility and hereby release VFHRN from all liability.

In signing this contract, I attest that I am voluntarily releasing custody of the above referenced equine completely and fully to VFHEN. I understand that in such cases VFHRN policies do not fully address specific or unforeseen situations, VFHRN will determine what is necessary and take such action, to the best of their ability, so as to ensure that the best interests of the equine are met. I further understand that the returned equine must have official documentation of current negative Coggins and documentation of currency on all vaccinations required by VFHRN policy. If the vaccinations and

coggins are not done, I will be responsible for the fees incurred to update the said horse. Fees may be waived in an emergency situation and will be assessed on a case by case basis.

This contract supersedes any prior understanding and oral or written agreement between the undersigned adopter and VFHRN. No amendment or variation of this contract shall be effective unless in writing and signed by or on behalf of each of the parties hereto.

Adopter's Signature	Date
VFHRN Representative Signature	Date
VFHRN #	Ses.
Rescu	e Network