

Voice For Horses Rescue Network

PO Box 566 - Toledo Ohio 43697

419-276-7443

www.voiceforhorses.org / voiceforhorses@att.net

Adoption Application/Agreement

All information must be completely filled out

ADOPTER'S INFORMATION:

Name- First _____ Last: _____

Email address: _____ D.O.B. _____

Driver License#/state _____ **(a copy of your driver license must accompany your application to verify the applicant)**

Telephone #: _____ Cell Phone: _____

Address: _____

City _____ State _____ Zip _____

Employed by: _____

Title: _____

Address: _____ Telephone: _____

1. Will the equine be kept at the above address? _____ If no, please provide the following information:

2. Name of Boarding facility: _____

Owner's Name _____

Barn Managers Name (if different than owner) _____

COMPLETE Address: _____

Telephone: _____ Business _____

Hours of operation: _____ The daily feeding will be done by _____.

If Boarding facility owner doesn't live at same address, someone is at the facility during the hours of _____

The boarding facility is _____ miles from my residence.

I intend on seeing my horse _____ days a week

****Please download our Lien Release Agreement Form and have owner of boarding facility complete and submit with the applications along with photos of facility and/ or the website where we can view the required information. Form can be found at <http://www.voiceforhorses.org/forms.html>**

Number of acres equine will be pastured on? _____ Total Number of Equine on Property _____

Other Animals on Property equine is housed _____

The type of corral/paddock, and or pasture size which will be provided is: **(Please provide photos)** Be detailed Types _____

Size/sizes _____

The Type of Shelter the horse will be provided is (barn/run in, stall)? _____

***** (Please provide pictures of barn, stall, loafing shed, pasture and horses you currently own) via email to voiceforhorses@att.net with application Initial (_____)**

Experience

How many Equine do You own? _____

(please provide a side view, full body photo of each horse via email to voiceforhorses@att.net)

Name of Horse #1 _____ Breed: _____ Age: _____

Name of Horse #2 _____ Breed: _____ Age: _____

Name of Horse #3 _____ Breed: _____ Age: _____

Name of Horse #4 _____ Breed: _____ Age: _____

Name of Horse #5 _____ Breed: _____ Age: _____

Are your horses current with their vaccinations? Yes _____ No _____

Who vaccinated them? You _____ Vet _____

Do your horses get routine vet care? Yes _____ No _____ Emergency care?? Yes _____ No _____

Are your horses current with worming? Yes _____ No _____, explain _____

Are your horses current with dental care? Yes _____ No _____, explain _____

Are your horses current with farrier care? Yes _____ No _____,
explain _____

If you do not currently own a horse have you ever? _____ IF YES, explain what happen to them _____

Have you SOLD any Equine in the last 5 Years? _____ If yes Why were they Sold?

Have you taken horses to auction for sale? _____ Horse Dealer? _____

Are you first time horse owners _____ How long have you owned Horses _____

In the following Area Please Indicate your level of experience using the following

NONE (N) -BEGINNER (B)-NOVICE (N)-ADVANCED (A).

Riding _____ Training _____ Handling _____ Working with young unbroken equine.

Please Elaborate regarding your years and types of experience,

Equine Care.

How much do you anticipate spending a year for:

Feed _____ Farrier _____ Vet Care _____

How often do you feel an equine should be de-wormed? _____

How often should they receive farrier care?

What types of vaccinations should an equine receive? _____

How often should a horse have dental work? _____

What brand/type of feed do you provide? _____ is it textured or pellet _____

What type of hay do you provide? _____ Square or Round Bales? _____

**Just a few more
Thanks for Sticking with it!**

DESCRIPTION OF HORSE TO BE ADOPTED:

Be sure to list the horse name and description here.

Name: _____ Gender: _____ Age: _____

Height: _____ Breed: _____ Color: _____

If this horse is unavailable will you consider others? _____ Are you flexible with your preferences? Y/N

Age _____ Size _____ Price _____ Sex _____ Breed _____ Training Level _____

Are you willing to adopt and train an untrained or unhandled equine? _____

If Yes Who will do the training?

Are you willing to adopt an abused or neglected equine? _____

Any Special Needs: _____

_____ **initial** (____)

What do you intend to use this horse for? _____

Do you intend to use the horse for Breeding? _____

Will you be Riding English or Western? _____

Will She/he be used as a school horse? _____

If yes, Please explain the type of work and how many hours a week the work will be done.

How many people will be riding the Equine? _____

Approximate Size and weight of riders _____

Do you object to our checking the property intended for the equine before adoption and/or i

Inspections after adoption? ____ If Yes Explain? _____

Please Initial and fill in all blanks

Do you Understand that Pictures of Equine adopted and updates are required within 45 days of adoption? _____(initial)

Are you willing to supply updates including medical records /reports pictures when requested? _____(initial)

Waiver of Liability

I UNDERSTAND THAT THERE ARE MANY RISKS INVOLVED IN RIDING, PARTICIPATING AND/OR BEING AROUND HORSES. I ALSO UNDERSTAND THAT, DUE TO THEIR SIZE, THEY ARE POWERFUL AND INHERENTLY DANGEROUS. I FURTHER UNDERSTAND THAT ANYONE RIDING OR NEAR A HORSE IS AT RISK AT ALL TIMES AND CAN SUFFER BODILY INJURIES AND/OR PROPERTY DAMAGE. I ALSO AGREE THAT I WILL NOT HOLD VOICE FOR HORSES RESCUE NETWORK OR ITS AGENTS, VOLUNTEERS, EMPLOYEES, ADVISORS, TRUSTEES, OR DIRECTORS RESPONSIBLE FOR ANY INJURIES, DEATH OR DAMAGES IF I SHOULD BE INJURED, KILLED OR HAVE DAMAGES RESULTING IN ANY WAY FROM THE ADOPTED HORSE. I HAVE READ AND ACCEPT THE TERMS AND CONDITIONS OF THIS ADOPTION AND PLACEMENT AGREEMENT. *Adopters Initials* _____

* **Disclosure and Release:** Adopter represents, warrants, and declares that Adopter is aware of the following in connection with his/her adoption of said animal from Voice For Horses Rescue Network:

- A) That animals are different from human beings in their responses to human actions.
- B) That the actions of animals are often unpredictable
- C) That animals should be closely and carefully supervised when they are with or around children;
- D) That the Adopted Animal's behavior may change after it leaves VFHRN's premises.
- E) That animals in a new environment may act differently and Adopter will afford the adopted animal adequate time (at least 7 days) to acclimate to its new environment before being ridden, to the extent the Adopted Animal is ride-able;
- F) That any statements made by VFHRN regarding the adopted animal, either orally or within this adoption agreement, are merely opinions and are made or given solely as a courtesy to those considering adopting an animal, and in no way amount to claims, representations or warranties as to the temperament, health, or

mental disposition of the Adopted Animal or the suitability or safety of the Adopted Animal for Adopter's intended purposes.

G) Adopter releases, discharges, indemnifies and holds harmless Voice For Horses Rescue Network from and against any and all claims, liens, damages, losses, and causes of action which may be asserted by Adopter and all third parties for injury or damage to all persons, property, or thing whatsoever caused directly or indirectly by the Adopted Animal.

Adopters Initials as to subsections a through g: _____

THIS AGREEMENT IS NOT AN AGREEMENT OF SALE BUT IS AN AGREEMENT OF POSSESSION.

Upon receipt of Adopter's signed agreement, and covenant to provide all necessary care for the said equine. VFHRN hereby transfers custody of said equine to the Adopter for the remainder of the horses' life. Upon this transfer of custody, Adopters releases VFHRN from liability in the event if injury, damage, or death to adopter his/her property and/or said equine as a result of said equines actions or behavior. Furthermore, adopter releases VFHRN from any liability arising from the delivery or said equine. _____ **(initial)**

Adopter shall provide all food, water, shelter, farrier, and veterinary care as is necessary to maintain said equine in good health and safety and shall provide a quality environment free of abuse, neglect, poor handling and/or mismanagement for remainder of said equines lifetime. Adopter shall keep VFHRN informed of all changes to (both equine and Adopter) name, address, and phone necessary to insure the protection of said equine and to enforce the provisions hereof. VFHRN retains the right to inspect any facility where said equine is kept at its discretion and without notice. If assigned agents of VFHRN determine that abuse or neglect exist, they retain the unilateral right to repossess said equine immediately or at such as may be required by the circumstances. Should VFHRN fail to immediately repossess the subject equine upon findings of abuse and/or neglect, such failure does not constitute a waiver of its right to do so subsequently.

Initial (_____)

If harm and/or death of said equine result from any act of omission, neglect or otherwise preventable situation, Adopter shall be liable therefore. Adopter agrees to pay any and all reasonable attorney's fees and all court costs of VFHRN in the event any matter arising under this agreement is forwarded to any attorney for enforcement of VFHRN rights and remedies under this agreement. _____ **(initial)**

Adopter shall be required to provide medical and farrier records/receipts showing proof of vaccinations, de-worming, dental work, farrier work, etc., for said equine at the request of VFHRN. Adopter is urged to notify VFHRN in any instance of severe medical problems and injuries of said equine. Adopter shall notify VFHRN of said equines death and may be required to provide a death certificate signed by a veterinarian. _____ **(initial)**

In the event of a divorce, separation or disillusion the said equine will remain with the adopter who has signed the adoption agreement. If VFHRN feels the equine is in danger during this situation VFHRN may/will remove the said equine from the possession of the adopter and or property to ensure its safety. _____ **(initial)**

In the event of the death of an adopter who has signed the agreement, VFHRN is to be notified and the horse must be returned back to VFHRN unless other arrangements have been approved by VFHRN President. _____(initial)

It is agreed that if In the event Adopter cannot or will not be able to continue care for said equine for whatever reason, sole ownership and custody of said equine will automatically revert to VFHRN and/or agents and/or assigns and must be transported at **ADOPTER'S EXPENSE** back to VFHRN. If the rescue has to incur expense of the hauling fees, the said Adopter will be billed for the amount of the hauling fees. If the hauling fees are not paid within 30 days after the return date of the equine, the amount may be sent to collection to recoup the fees. _____(initial)

VFHRN may update its records and monitor the whereabouts, health and safety of the horse at any time. _____(initial)

**** Adopter will complete a copy of the within Application and Agreement, and the subsequent Adopter shall be bound by the terms thereof. Finally, the undersigned agrees that this animal will not be resold at any type of auction, horse broker, horse dealer, feed lot or slaughter destination, given away, bred, traded, leased, raced (x-Race horse) or transferred to anyone other than VFHRN. This is a lifetime lease and sole custody belongs to VFHRN for the natural life of the horse _____(initial)**

Adoption Donation: Concurrent with the Signature of this Agreement, Adopter has paid a **non-refundable** adoption donation in the amount of _____ and 00/100 Dollars (\$ _____) to Voice For Horses Rescue Network. Payment in full of the adoption donation is required before removal of the adopted animal from Voice For Horses Rescue's facility. This adoption donation may be tax deductible by the adopter, although Voice For Horses Rescue Network makes no representation or warranty in that regard. Adopter should consult his/her independent tax advisor to determine deductibility.

Adopted Horse Pickup - VFHRN will hold the horse for 5 days at no cost to the adopter until it can be picked up. After 5 days the adopter will be charged \$10 per day until the horse is picked up and fees must be paid before the horse leaves the rescue. _____ **Adopter's Initials**

*** Prohibited Uses:** ADOPTER AGREES THAT UNDER NO CIRCUMSTANCES SHALL THE ADOPTED ANIMAL BE USED FOR BREEDING PURPOSES OR BE BRED, **Any foal born to an adopted mare falls under the same conditions per this agreement as the dam.**

Adopter's Initials: _____

After adopting, the new owner incurs all responsibility for the horse, including responsibility for any injuries or illness which may occur. By signing below, you acknowledge that you consider the facility where the horse will be staying to be in suitable condition. The owner of the property and VFHRN assume no responsibility for any injury or illness which may occur while your new horse stays at this property. VFHRN personnel, foster owners, and others may handle your horse for the purpose of moving from one pasture on the property to another or for feeding, watering,

grooming etc. In the event that a medical problem is noted, we will attempt to contact you immediately at the following numbers: _____ (1st choice), _____ (alternate) _____ (alternate). If you can be contacted, you will be given the option of having our veterinarian examine and treat the horse at your expense or you may use a veterinarian of your choice. If you cannot be contacted or are unable to have a veterinarian arrive within a reasonable time frame considering the nature of the illness/injury, Our veterinarian will proceed with examination and treatment as deemed appropriate and you agree to pay Voice For Horses Rescue Network for the treatment by the time the horse is picked up or within 7 days whichever occurs sooner. Please initial here _____ indicating that you have been informed that this horse must be picked up within 7 days of adoption or boarding fees will be charged. Boarding is \$8 per day. If you do not pay the boarding fees within 7 days of when the fees begin, you forfeit ownership of the horse and the adoption fee will not be refunded.

Signature: _____ Date: _____

Date boarding fees will begin: _____

In the event the undersigned fails to comply with the terms of this Application and Agreement, VFHRN reserves the right to commence legal proceedings to recover the horse, and the undersigned shall be liable for all costs including damages to VFHRN, assumed at a minimum of \$3,000.00, inclusive of attorney's fees, in connection with such legal proceeding.

This agreement is accepted by:

Signed _____ Date _____

***Adopters signature warrants that the Adopter is at least 18 years of age at the time of signature and acknowledges receipt of the Processing Terms and Conditions contained within this /application/agreement and understand that VFHRN holds the right to refuse services to anyone for any reason. Initial (_____)**

REFERENCES:

Signing this application authorizes _____ (initial) VFHRN to contact the listed references and inquire about your equine experience.

1. Name: _____ Telephone: (____) _____ - _____
Comments: _____
Email address _____

2. Name: _____ Telephone: (____) _____ - _____
Comments: _____
Email address _____

3. Name: _____ Telephone: (____) _____ - _____

Comments: _____
Email address _____

4. Name: _____ Telephone: (____) _____ - _____
Comments: _____
Email address _____

5. **Farrier:** _____ Telephone: (____) _____ - _____
Comments: _____
Email address _____

The equine veterinarian who will care for this animal is:

Name: _____ Telephone: (____) _____ - _____
Comments: _____
Email address _____

The Name and Number of your Equine Dentist is

Name: _____ Telephone: (____) _____ - _____
Comments: _____
Email address _____

Name and Number of your local Humane Society/ Animal Control is (if no Humane Society then the number of your Local Police Dept)

Name: _____ Telephone: (____) _____ - _____
Comments: _____
Email address _____

****this application/agreement is transferable to any horse that is adopted through VFHRN and other horses can be placed with the adopter under same application.***

Name _____ (please Print)

Sign _____ Date _____

***Please check your application over and be sure it is filled out completely, any incomplete applications will be considered ineligible. .**

Application Approved on _____ By: _____

Application Denied on _____ By: _____