

Triple Acres Horse Rescue, Inc.
ADOPTION/FOSTER APPLICATION

*Our only goal is to find the best home for the horses that pass through our gates.
If you can provide that home, we are more than willing to work with you.*

Applicant's Name _____

Co-Applicant's Name _____

Street Address _____

City, State & Zip _____

Mailing address: _____

Telephone No: Home _____ Cell: _____

Email _____

How did you hear about us? _____

APPLICANT INFORMATION

Applicant's Current Employer: _____ Position: _____

Years with this Employer: _____ Work Phone: _____ Hrs worked per week: _____

Employer's Address: _____

Co-Applicant's Current Employer: _____ Position: _____

Years with this Employer: _____ Work Phone: _____ Hrs worked per week: _____

Employer's Address: _____

ANIMALS OWNED:

**Please list all animals currently owned and length of ownership
(INDICATE IF ANY DO NOT LIVE WITH YOU CURRENTLY & REASON WHY):**

If none currently owned, list any past owned, and when

HORSE PROPERTY LOCATION

If the horse will be kept someplace other than the street address listed above, please provide:

Name of the facility: _____

Address: _____

Contact person and phone number: _____

What type of boarding will be provided? (full/partial?) _____

REQUIRED REFERENCE INFORMATION:

Please provide any professional references regarding your involvement with horses (**One must be your veterinarian**) Others may include farrier, trainer, etc.

Vet Name: _____ Phone _____

Address: _____

Name and role: _____ Phone _____

Address: _____

CURRENT HORSE INFORMATION

How many horses do you currently have? _____

Date of last vaccinations for your horses: _____

Date the horses were last dewormed: _____

Date of last negative Coggins, (if applicable) please list date on all horses

HORSE EXPERIENCE

Is this your first horse? _____

If you currently do not have any horses, have you previously owned and if so for how long?

In the past five years, have you given away or sold any horses? Please explain.

In the past five years, have you had any horses pass on while in your care? Please explain.

Have you ever surrendered a horse to a humane society, rescue organization, or animal control? Please explain. _____

HORSE(S) YOU ARE INTERESTED IN List names in order of preference:

1) _____

2) _____

3) _____

Why do you want to adopt this/these horses? _____

What do you plan on using this horse for? _____

How much time per week do you plan on spending with the horse?

Describe your experience with handling, caring for, riding, and/or training horses.

CARE:

Who will be feeding the horse? _____

How often do you plan on having a farrier trim or shoe the horse? _____

How often do you plan on worming the horse? _____

How often do you plan on having a veterinarian visit the horse? _____

Will the horse be kept in a barn or pasture? _____

If the horse is in a barn, what size are the stalls? _____

If the horse is in a barn, how often and how many hours will they be turned out? _____

If the horse will be kept in pasture, what size is the paddock/pasture? _____

How many other horses are in the paddock/pasture? _____

Type and size of shelter in the paddock/pasture: _____

Type of fencing surrounding the paddock/pasture: _____

Have you or any member of your family, or co-applicant or co-applicant's family ever been charged/arrested for any type of animal welfare violation? _____

Was there a conviction? _____

If yes, describe in detail: _____

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***OUT OF STATE ADOPTIONS:** All expenses incurred (including - but not limited to - health certificate and Coggins test) will be added to the adoption fee.

ACKNOWLEDGEMENT:

The potential adopter(s), _____, give permission for all persons and facilities listed in this application to release all data, regarding applicant(s), to Triple Acres Horse Rescue, Inc. I/We hold harmless any actions arising from release of the information from my contacts to Triple Acres Horse Rescue, INC. I/We understand that Triple Acres Horse Rescue, INC. may perform a background check to verify my/our personal information as well as check for any criminal convictions for animal abuse and/or neglect.

Adoption: _____

By signing this application, I understand that if I adopt a horse from Triple Acres Horse Rescue, INC. I agree to a pre-adoption site visit and life-long follow up visits. In addition, I understand that the horse I adopt **cannot be bred or sold**.

If, for any reason, I cannot keep the horse I will re-surrender it to Triple Acres Horse Rescue, INC. (Within first 30 days, a full refund will be made – less \$25 application fee. After 30 days, no refund will be made.) If I know of someone who wants to adopt the horse, I will contact Triple Acres and the Board must approve this adoption.

Foster: _____

By signing this application, I understand that Triple Acres Horse Rescue, INC. maintains ownership and that the horse is still available for adoption. I acknowledge that I am responsible for all feed, farrier, medical, and other expenses while this horse is in my care.

Applicant/s signature Date

Signature of (2) Board members Date

RETURN COMPLETED FORM TO:

Triple Acres Horse Rescue, Inc
51110 Olson Road
Boone, CO 81025

QUESTIONS: CALL 719-924-5101 or email tripleacreshorserescue@gmail.com