

Horse Adoption Application 2010

Fill out the form below, and send it to: Mountain View Rescue

PO BOX 1542

Columbia, KY 42728

mountainviewrescue@yahoo.com

Fax- 270-384-5612

All applications must be accompanied by a \$20 processing fee.

(If you do not adopt a horse, it will be considered a donation.)

NAME _____

ADDRESS _____

PHONE # _____

E-MAIL _____

WEBSITE _____

Have you ever been accused or convicted of abuse to an animal or human? Yes No

VETERINARIAN'S NAME _____

PHONE # _____

CITY, STATE, ZIP _____

ALTERNATE VET _____

PHONE # _____

CITY, STATE, ZIP _____

FARRIER & PHONE _____

REFERENCES, Other than family

1. Name _____ Relation _____ Phone _____

City & State _____ Zip _____

2. Name _____ Relation _____ Phone _____

City & State _____ Zip _____

Marital Status: _____

Current Employer _____ Phone # _____

Annual Household Income \$ _____

Background & Experience

What is your experience with horses?

Have you owned a horse previously? Yes No

Have you had professional schooling or lessons? If so, what discipline, for how long, and when? _____

How many other horses do you own? _____ Total
_____ Mares _____ Geldings _____ Stallions _____ Under age 2

Do you have experience training? (Explain in Detail)

Do you live where the horse(s) will be kept? Yes No (*if no, please explain*)

Do you own a trailer? Yes No Have one I am able to borrow

Choices: Breed, Color, Age, Sex, Condition

Check the animals you would be willing to adopt, from the following list:

- | | | | | |
|-------------------------------------|------------------------------------|--|-------------------------------------|--|
| <input type="checkbox"/> Old | <input type="checkbox"/> Blind | <input type="checkbox"/> Deaf | <input type="checkbox"/> Lamé | <input type="checkbox"/> Abused |
| <input type="checkbox"/> Pregnant | <input type="checkbox"/> Orphaned | <input type="checkbox"/> In need of medication | <input type="checkbox"/> Sound | |
| <input type="checkbox"/> Un-ridable | <input type="checkbox"/> Un-broke | <input type="checkbox"/> Green Broke | <input type="checkbox"/> Very Young | |
| <input type="checkbox"/> Any Size | <input type="checkbox"/> Any Breed | <input type="checkbox"/> Gelding | <input type="checkbox"/> Mare | <input type="checkbox"/> Unknown History |

Would you be willing to give a retired, senior horse a permanent home, if need arises? Yes No

BREED CHOICE

1st Choice _____

2nd Choice _____

COLOR CHOICE

1st Choice _____

2nd Choice _____

AGE CHOICE

1st Choice _____

2nd Choice _____

Mare _____ **Gelding** _____ **Height** _____

- I am flexible Somewhat flexible Not flexible

Name of horse you would like to adopt if applicable _____

Horses will be adopted at least two at a time, unless you currently have other horses.

How many horses do you want to adopt? _____

Most horses will need to be picked up within 1 week from the date of deposit. Will this be adequate time for you to provide transport? Yes No

If no, how much time will you need?

CARE

Shelter

1. Will the horse(s) be stabled? Explain.
2. How big is their shelter?
3. Explain shelter layout- (Please include diagram or pictures)
4. What type of fencing do you have? (Please include pictures)
5. How big is your enclosure? (Please include diagram or pictures)
6. How many horses will share this area?
7. How many hours will the horse(s) be outside per day?
8. How often will the horse(s) be exercised?

Nutrition

1. How many times per day will the horse(s) be fed?
2. What will their feed consist of?
3. Will they be separated at feed time?
4. Will they have access to a constant clean water source?

Maintenance

1. How often do you vaccinate your horses?
2. How often do your horses get wormed?
3. How often do you have your horses teeth floated?
4. How often are your horses feet trimmed?
5. What are your plans for this animal(s)?
6. Are you planning on breeding this animal(s)? Yes No
7. Are you able to handle the burial of a horse, if the need arises? Yes No

By filling out & signing this Adoption Application, I have every intention of adopting horses from Mountain View Rescue, and if my circumstances change I will notify Mountain View Rescue as soon as possible.

By signing the Adoption Application, I declare that all of the information that I have submitted to be the truth, to the best of my knowledge, and if found to be fraudulent, that I will be denied approval of adoption, and I could be held liable.

I have fully read and I understand the contents of the above Adoption Application and hereby certify that I am: at least 18 years of age, and I agree to abide by ALL of the policies, and rules concerning adoption, set forth by Mountain View Rescue, Inc.

Printed Name: _____

Signed: _____ Date: _____

Age: _____

Signature of Parent or Guardian, if under 18: _____

(For internal office use only)

Date Received: _____ Agent: _____

Approved: _____ Date: _____

Denied: _____ Date: _____

Reason for Denial:

Adoption Date: _____
Adoption Fee: _____

Mountain View Rescue, Inc.
PO Box 1542 Columbia, KY 42728

Name: _____
Description: _____
Sex: Mare Gelding Colt

HORSE ADOPTION CONTRACT 2010

I agree that in consideration of being allowed to adopt the attached file described horse from Mountain View Rescue, Inc. I will fulfill the following contractual requirements. If I am unable or unwilling to do so, I must return the horse to Mountain View Rescue, Inc. or I agree that the animal may be impounded from me. All records and history on the horses before adoption will be on the web page <http://www.mountainviewrescue.com/Current%20Horses.htm> Also, all information will be given, on paper, to the adopter when adoption is completed.

____ 1. I, the adopter, agree that if not returned to Mountain View Rescue, I will keep the horse(s) for a period no less than 1 (one) year. I, the adopter, agree to maintain a proper environment for the horse(s), including, but not limited to, proper veterinary care, shelter, fencing, food, water and humane care, and an environment that is clean, with daily turnout space, to maintain the health of the horses. I agree to have a veterinary check this animal every twelve (12) months and give yearly vaccines. I further agree to routine farrier care to be provided every 6-10 weeks or as directed by a professional farrier. I agree to routine worming of this horse(s) every 6-8 weeks as directed by my enclosed schedule. If at any time within the first one (1) year of adoption I am no longer able to care for this horse, or this horse becomes unwanted, I agree that I will return it to Mountain View Rescue, Inc at my expense. I further agree not to give away, lend, lease, sell or dispose of this horse within the first one (1) year unless written consent is given by Mountain View Rescue, Inc.

____ 2. I, the adopter, agree to refrain from breeding the horse(s) unless given a clean breeding examination by a licensed veterinarian, and first submitting said examination report to Mountain View Rescue, Inc. for approval. If this horse(s) has not been gelded prior to adoption, I agree to have this horse gelded at the time selected by my veterinarian. I understand that the cost of this surgery will be my financial responsibility. In the event that I do not geld this horse by the date specified by my veterinarian, I will immediately return the horse to Mountain View Rescue, Inc. upon request.

____ 3. After a one (1) year probation period a permanent ownership paper will be available to eligible adopters with the following stipulations: If I, after that time decide to sell, or otherwise dispose of, this adopted horse(s), that I will not sell or give them to anyone known or suspected that the horse(s) will be in danger of going to neglectful/ abusive parties or slaughter. Adopter shall hereafter also stipulate that these ownership terms be included in any type of ownership transfer to another party. It is understood that after the initial one (1) year adoption agreement is finalized the adopter shall apply to Mountain View Rescue, Inc. in writing for the ownership registration paperwork. Registration papers, if available, will only be issued to the adopter after the 1 year period is over and the Adopter has been deemed fit to retain ownership of the horse(s).

____ 4. I, the adopter, agree that there is no warranty; expressed or implied by Mountain View Rescue, Inc. of this horse(s) age, breed, health, future size, behavior or temperament. I hereby release and agree to hold Mountain View Rescue, Inc., its employees, agents, directors, members, successors and assigns from any claim, liability or cause of action arising out of or in any way related to, my adoption or ownership of this animal. I further agree that Mountain View Rescue cannot be held responsible for any unforeseen health problems, injuries or accidents occurring in these adopted horses.

____ 5. Mountain View Rescue, Inc. has the right and permission to send a licensed vet of their choice to examine the horse(s) at any time during this period. Mountain View Rescue has the right & permission to remove any horses in Adopters care, if it is found that the horses are not being cared for as described above. Entry upon my premises for such purposes shall not constitute as trespassing. No adoption fees or monies of any kind will be refunded to Adopter. All papers that were given to the adopter will also be returned to Mountain View Rescue, along with the horse(s). Mountain View Rescue, or one of its representatives, has 14 days from the time of notification to pick up said horse(s).

____ 6. I agree that if I have to move the horse(s) from the location specified on this contract, I will first notify Mountain View Rescue of my intentions. Adopter should notify Mountain View Rescue immediately upon any of the following situations: horse(s) will be moved from property listed on application; horse(s) has been injured or is sick. I further agree that if any of the stipulations within this application change regarding my property, my income, my employment, or otherwise, I will contact Mountain View rescue to update them on my current situation.

____ 7. If this animal should die while in my custody, I will report such a death to Mountain View Rescue, Inc. with a copy of the Veterinarian report of cause of death within thirty (30) days of passing.

_____ **8.** A deposit in the amount of 25% of adoption fee is required to hold horse(s). If I, the Adopter, should change my mind about adopting a horse, I will receive a refund, minus 25%. If I do not pick up the horse(s) when agreed, a feed & board charge of \$12.00 per day for nursing foals or \$5.00 for weaned horses will be added to the cost of the horse(s). This cost is per horse.

_____ **9.** I understand, that within a period of 2 weeks, if I am not happy with the horse(s), I can return the horse to Mountain View Rescue at my expense; provided they are in as healthy condition as when I adopted them, and I will receive back, the entire adoption fee that was paid, minus 25%.

_____ **10.** Liquidated Damages and Attorney Fees: I agree to pay Mountain View Rescue, Inc. \$250.00 as liquidated damages in the event the terms of this contract are breached. This liquidated damage provision is agreed to for the purpose of establishing MVR, Inc staff and administrative expenses in the event of a breach and does not bar Mountain View Rescue, Inc from also seeking return of the animal by judicial process or other legal means. In addition, I agree to pay all reasonable attorney's fees and expenses in the event this contract is forwarded to an attorney for enforcement.

_____ **11.** I understand that this horse(s) does not qualify as personal property. In the event of my death my heirs shall return horse(s) to Mountain View Rescue, Inc. If I am currently married my spouse understands this stipulation and agrees that I am the sole adopter and this horse(s) can not be considered personal property in the event of a divorce.

_____ *Spouses initials*

_____ **12.** By signing the Adoption Application, I declare that all of the information that I have submitted to be the truth, to the best of my knowledge, and if found to be fraudulent, that I will be denied approval of adoption, and I could be held liable.

I have read and understand the above terms of this contract and agree to all of them. I understand that if I abide by the terms of this contract, after one (1) year I can apply to MVR for complete ownership of the above described animal.

HORSE(S) BEING ADOPTED _____

Adopter's Signature

Date

Witness of Adopter's Signature

Date

MVR Representative's Signature at time of pick-up

Date