



ADOPTION APPLICATION

Note: Adopted horses remain the property of AAR. Adopters may not breed, race, sell or give away the adopted horse. Adopters must allow AAR to inspect their facility for safety prior to adoption, and access to check the horse thereafter at AAR's discretion.

YOU MUST BE 18 YEARS OR OLDER TO SUBMIT THIS APPLICATION.

If you are a minor, please have your parent or guardian submit this form.

Date:

ADOPTOR INFORMATION

Name:

Address:

City: State: Zip:

County: (Note: We are asking for county, not country.)

Phone #: (Home)

Phone #: (Work)

Phone #: (Cell)

E-mail:

Have you previously owned a horse(s)? Yes No How long ago?

Do you currently own a horse(s)? Yes No For how long?

Do you currently own or rent the property above? OWN RENT

If renting, name of owner:

How long have you lived at the above address?

If you are employed, skip to "Current Employer." If you are not employed, please provide employment information for the person who will be financially responsible for the adopted horse.

Name of person whose employer information is below:

Relationship to this person:

Current employer:
Employer address:
Employer address:
City: State: Zip:
Years employed with this company?

List two of the closest relatives not living with you and who live in different homes:

1ST Name:
Phone: Relationship to you:
Address (No P.O. Boxes):
City: State: Zip:

2ND Name:
Phone: Relationship to you:
Address (No P.O. Boxes):
City: State: Zip:

FACILITY INFORMATION

Will the horses be kept at the above address? YES NO
If "No," we need the following information about the property where the horses will be kept:

Name of owner:
Address:
City: State: Zip:
Phone:

Number of acres in which horse will be pastured on:
Total number of horses on above acreage:

Type of shelter the horse will be provided (select one):
If "other," please describe:

Type of fencing (AAR does not accept barbed wire fencing):

HORSE CARE

How much do you anticipate spending yearly for the following:

Feed \$: /year

Farrier \$: /year

Veterinary care \$: /year

Board \$: /year

What deworming method will be used?

How often will deworming be done?

How often will you have the horse's teeth checked and floated?

What vaccines will you give and how often?

EQUINE PREFERENCES

The more flexible you can be in your specifications, the more likely it is that we can match you with a horse. 16 hand, dead-broke quarter horses between 5 and 15 years old rarely make their way to the AAR. However, we may have a 20 year old, well-broke appaloosa that would suit you very well. When making your specifications, please make sure you indicate the absolute maximum and minimum you will accept.

If a specific horse interests you, please enter his/her name here:

Do you need an equine that is or will be rideable? * Yes No Don't Care

*(If you answer "yes," you will only be offered horses that are currently or will in the future be able to be ridden. If you answer "don't care," you will also be offered horses that can never be ridden for one reason or another.

Please specify any acceptable height range: hands

Please specify any acceptable age range:

Are you interested in (check all that apply): Horse Pony Mule Donkey

What is your breed preference:

Will you consider another breed? Yes No

Please check the rider's experience level (Make one X per rider):

Has been riding for less than 2 years:

Regularly rides on: Trails Pleasure

Rides seriously in: Large shows Small shows Horse training experience

Is a professional trainer/instructor:

I will consider a horse that is (check all that apply):

Unbroke Green-broke Well-broke Dead-broke

What use do you intend for this horse? Please include such things as age and weight of intended rider, trail riding, pleasure, jumping, competition, etc. The more information you give us, the easier and faster it will be to match you with a horse.

REFERENCES

Please list two references who are familiar with your care and experience with horses:

Name: Phone:
Name: Phone:

HUMANE VIOLATIONS CHECK

Have you ever been issued a warning/citation, or been convicted for human violations? YES NO
If "Yes," please explain:

I am at least 18 years of age: YES NO

I/WE CERTIFY THAT ALL OF THE INFORMATION CONTAINED HERIN IS CORRECT AND TRUE.

Signature: Date:
Signature: Date:

If you are unable to submit this form online, you may print the form and mail it to:
Alaqua Animal Refuge
PO Box 48
Freeport, Florida 32439