

RIDE of Rochester

Rescue/Recreation Involving Deserving Equine

Adoption Application:

(Please be aware that you must be 18 years or older to apply)

Name: _____ Age: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Cell: _____ E-mail: _____

Horses Applying For:

_____ Fee: _____

_____ Fee: _____

_____ Fee: _____

Intended Use:

WAIVER OF LIABILITY

I, _____ (Adopter's Printed Name) understand that RIDE and it's representatives are not liable for misrepresented horses. I understand that all of the information available regarding any particular horse is based solely on data provided by former owners, trainers, veterinarians, RIDE foster providers, RIDE trainers and RIDE volunteers.

RIDE does all it can to ensure the health of the horses adopted though us. However, RIDE is not responsible for any health issues present in, or incurred by these horses. The applicant agrees not to hold RIDE liable for any costs incurred as a result of any health-related or accident related problems with said horse.

Adopter's Signature

Date

At RIDE, the future care of our horses is of first importance to adoption committee volunteers. It is our goal to place each horse in the most appropriate home. The information you provide on the following application will help us determine your compatibility to the animal(s) requested, or provide insight on a more suitable animal. Therefore, please be sure to fully complete each section of the application. Incorrect information could result in a delay of processing your application. Applications must contain a non-refundable \$10.00 RIDEN Application Fee per horse. Applications are considered time sensitive, and reviewed on a "first come, first serve" basis. Incomplete applications will not be considered. References and facilities will be checked.

Section 1: Facilities and Daily Care

Location of Adoption Site: _____

Is this a Stable/Professional Facility or Private/Residential Site? _____

Please Check the following if Available at this Site:

___ **Box Stall (Size)**_____ **(Construction)** _____

___ **Run-In Barn (Size)**_____ **(Construction)** _____

___ **Pasture Shelter (Size)**_____ **(Construction)** _____

___ **Arena (Size)**_____ **(Construction)** _____

___ **Round Pen (Size)**_____ **(Construction)** _____

___ **Dry Lot (Size)**_____ **(Construction)** _____

___ **Pasture (Size)**_____ **(Construction)** _____

___ **Shade Trees** ___ **Wind Break** ___ **Natural Water Source (Type)**_____

___ **Tack Room** ___ **Small Grains/Feed Room** ___ **Hay Storage (Type)** _____

___ **Running Water/Hydrant** ___ **Automatic Water Source** ___ **Washing Facilities**

___ **Electricity** ___ **Telephone** ___ **Intercom** ___ **Video Surveillance System**

___ **Security System** ___ **Sprinkler System** ___ **Emergency Medical Supplies**

Please Describe the Facility the Horse will have, including acreage, type and height of fencing, shelter, security and distance from your home location.

If this is a Boarding Facility, please provide the following additional information:

Name of Facility: _____

Business Address: _____

Owner or Manager's Name: _____

Business Phone Number: _____ **Best Time to Call:** _____

PLEASE NOTE:

Facility will be contacted to make sure they are aware of the needs of a rescued horse and have adequate facilities.

Please Draw Site Map, noting Permanent Location for Horse to be approved:

Party Responsible for Daily Care of Horse: _____

Experience with caring for Horses: _____

Back-up Care Provider: _____

Experience with caring for Horses: _____

Hay Source: _____ **Phone:** _____

Feed Store: _____ **Phone:** _____

Facilities Inspection Consent Waiver

I have received, read and agree to follow the RIDE Adoption Inspection Guidelines as they pertain to general care expectations, and facility requirements of Adoption Applicants. I hereby authorize RIDE to send a representative to physically inspect my pending site, and agree that my adoption application will not be approved without said inspection.

Adoption Applicant's Signature

Date

Section 2: References and Resources

Support is equally important as information when dealing with adoptive (or any) horses. No one person can claim authority on all aspects of horsemanship, so we encourage the use of many. Please list your:

Professional Resources:

Vet's Name:
Address:
Phone Number:
Best time to call:

Farrier's Name:
Address:
Phone Number:
Best time to call:

Trainer or Instructor's Name:
Address:
Phone Number:
Best time to call:

Humane Society's Name:
Address:
Phone Number:
Hours of Operation:

Local Law Enforcement:
Address:
Phone Number:
Sheriff:

Personal References:
(Note that these may not be family members)

Name:	
Address:	
Phone Number:	Years Experience:
Best time to call:	Years Acquainted:

Name:	
Address:	
Phone Number:	Years Experience:
Best time to call:	Years Acquainted:

Name:	
Address:	
Phone Number:	Years Experience:
Best time to call:	Years Acquainted:

Section 3: Adopter Experience

In order to place each horse in the most suitable home, RIDE will need to determine your level of equine experience and capability to provide for the horses needs. Please answer the following and explain:

1. How much are you planning to financially contribute to the care of this animal on an annual basis? _____
2. How many years experience with horses or other large animals do you have? _____
 If so, what? _____
3. Have you participated in any horsemanship or training clinics? _____ If so with what clinician? _____

4. Have you ever participated in any equine competitions? _____ If so, what type? _____
5. Are you a member of any Breed Association or Saddle Club? _____ If so, which? _____
6. Have you experienced the following: (Circle) Colic, Laminitis, Founder, Proud Flesh, Arthritis, Heaves, etc.? _____ (If so, Please Explain) _____

7. Do you subscribe to any equine related publications? _____ If so, which? _____

8. How many animals do you currently own? _____ If so, what? _____

9. Have you ever adopted an animal from a Humane Society or other animal adoption organization? _____ If so which org., and what? _____

10. Why are you interested in adopting? _____

Thank you for taking the time to fully complete this adoption questionnaire!

This Section Reserved for RIDE Office Use Only!		Date: _____	Initials: _____	Fee: _____
Vet: _____	Farrier: _____	Trainer: _____	Humane: _____	Sheriff: _____
Ref #1: _____	Ref #2: _____	Ref #3: _____	Hay/Feed: _____	Boarding? Y / N
Site Check: _____	Date: _____	Pass /Fail: _____		
Code Signed: _____	Waiver Signed: _____	Visit #1: _____	Visit #2: _____	
Animal(s) Approved: _____				
RIDE Approval By: _____				