EQUINE ADOPTION APPLICATION

Name:	Date:		
Spouse's Name:			
Address:			
City:			
Phone:	Alt. #:		
E-mail			
Horse(s) interested in:			
Answer all the following quest (PAWS) via email, in person of Walton Beach, FL 32548, 850-	r fax: PAWSaly@gmail.co		
Background and Experie	<u>ence</u>		
1. Have you previously ov	wned a horse? (circle one)	YES	NO
-When and for how long?			
-If yes, did you board or directl	ly care for your horse?		
2. What is your level of exBEGINNER INTERN	-	ele one) ANCED	
Please describe your experience trainer; what types of clinics has			

3. Would you adopt a horse with physical limital light trail riding)? YES NO		npanion only; no jumping;
4. Describe the activities you plan with the hors	se.	
Shelter		
Where will you keep the horse? (circle one) HOME BOARDING FACILITY	OTHER_	
-If boarding, please provide the name, address a caretaker.		-
2. Will the horse be stalled? (circle one)	YES	NO
-If so, what are the stall dimensions (i.e. 12x12)		NO.
-Is daily turnout provided? (circle one) Please describe the turnout area (acreage), numb footing, fencing, etc.	YES ber of horses sh	NO naring the area, type of
3. If your horse will be primarily in a pasture, w		
What type of fencing encloses the pasture?		
What is the acreage of the pasture?		

How many horses share the pasture?	
Nutrition	
1. How many times per day will the horse	be fed?
2. What will the feed consist of?	
<u>Maintenance</u>	
1. Who do you plan to use as your equine	veterinarian?
Name:	
Phone:	
2. Who is your farrier?	
Address:	
Phone:	
Email:	
3. Please provide two references (other that ability to provide proper care for the horse,	, , , , , , , , , , , , , , , , , , , ,
Name:	Name:
Relation:	Relation:
Phone:	Phone:

I, the adopter, agree to maintain a proper nutritional program for the horse, including but not limited to, quality forage, grains, supplements, and access to fresh water at all times. I, the adopter, agree to refrain from breeding the horse. I, the adopter, also agree to provide satisfactory care of the horse, including, but not limited to, routine licensed Veterinary care, routine worming, farrier care, vaccinations, proper fencing and shelter, and an environment that is clean, with daily turnout space to maintain the health of the horse. Neglect of any of these requirements will constitute a breach of the adoption agreement and might result in removal of the horse.

PAWS reserves the right to check on the horse periodically. PAWS has the right and permission to send a vet of their choice to examine the horse where it is housed at any time during this period. PAWS has the right and permission to remove any horses in Adopter's care if it is found that the horses are not being cared for as described above. No adoption fees or monies of any kind will be refunded in the event of such a removal. Registration papers, if available, will only be issued to the adopter after the adoption is finalized and the adopter has been deemed fit by PAWS to retain ownership of the horse.

PAWS has the right of first refusal if the horse is to be sold, traded, leased, or given away. The horse is not to be used for breeding.

I, the adopter, understand that the amount to be paid for adopting the horse will be determined by PAWS and will be based upon the condition and training level of the horse (more for a well trained riding horse, less for a companion horse that cannot be ridden).

By signing this 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 for any damages incurred by PAWS.

Adopter's signature	
Panhandle Animal Welfare Society, Inc	