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360-282-6667 • WWW.EQUINEAID.ORG
EIN: 27-093984

EQUINE AID Horse and Donkey Rescue: Adoption Application

Name of Equine(s) you are applying for:

Date:

If this animal is not available, what type of equine are you interested in? Describe age, breed preference, height, and training considerations:

Are you willing to adopt a horse with a limitation (lameness, injury, needing medication or special diet)? Yes / No

Your Name:

Occupation:

Address:

City, State, & Zip code:

Cell Phone:

Home Phone:

Email:

Do you have the financial capability to care for a horse? Yes / No

Name of Your Veterinarian:

Telephone:

Address:

City, State, & Zip code:

Name of Your Farrier:

Telephone:

Address:

City, State, & Zip code:

Personal References:

References should be someone, unrelated to you, with knowledge of your horsemanship skills, or if you are new to horses, your skills with animals. If you are new to horses please include the name of the friend or trainer who will be helping you with your horse.

Our Mission:

To provide rescue and rehabilitation, placement or sanctuary for equines in need and to serve as a voice against all abuse.

Name: _____ **Relationship:** _____
Telephone: _____

Name: _____ **Relationship:** _____
Telephone: _____

Name of Trainer or Helping Horseman: _____
Telephone: _____

Horse Property Information: Circle one: Own Property / Rent Property / Board

Describe shelter, type of fencing, number of acres and number of other horses on the property:

If boarding, please complete the following:

Name of Facility: _____ Contact Name: _____
Telephone: _____
Address: _____
City, State, & Zip code: _____

If renting property, please complete the following:

Name of Landlord: _____ Phone Number: _____

Have you obtained permission from your landlord to keep a horse on the property? Yes / No

Horse Experience

Please list equines currently in your care with age and breed:

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Briefly describe your horse experience and training philosophy:

Why do you want to adopt a horse/donkey?

Anything else would you like to say?

I certify that all the information contained herein is true and correct:

Signature:

Date:

Printed name:

******* End of Application *******

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