



## SWEETBEAU HORSES - ADOPTION APPLICATION

<b>Applicants' Last Name</b>	
<b>Applicant's First Name</b>	
<b>Street Address</b>	
<b>City</b>	
<b>State</b>	
<b>Zip</b>	
<b>Home Phone</b>	
<b>Mobile Phone</b>	
<b>E-mail</b>	
<b>Driver's License Number</b>	
<b>Social Security Number or TIN</b> <small>(required for tax exemption)</small>	
<b>Annual Household Income</b>	<input type="checkbox"/> Less than \$50,000 <input type="checkbox"/> \$50,000 - \$75,000 <input type="checkbox"/> \$75,000 - \$100,000 <input type="checkbox"/> \$100,000 - \$150,000 <input type="checkbox"/> \$150,000 +

What will be your primary use for this horse? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

What is the height and approximate weight of the primary rider? \_\_\_\_\_

Will you be working with a trainer?    Yes    No

If Yes: Who is the trainer? \_\_\_\_\_

What is the goal with the trainer: \_\_\_\_\_

Will there be others authorized to ride the horse?    Yes    No

If so , who and what ages and relationship to you? \_\_\_\_\_

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What is the approx.. height and weight of additional riders: \_\_\_\_\_  
 \_\_\_\_\_



Have you ever been charged, investigated or convicted of animal abuse or inhumane treatment of animals?

Yes  No

If Yes, explain circumstances and location: \_\_\_\_\_

Have you previously adopted horses?

Yes  No

If YES, from who? \_\_\_\_\_

What kind of horse? \_\_\_\_\_

Where is the horse now and what is it used for? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you previously adopted a horse from Sweetbeau Horses?

Yes  No

If **Yes**, please provide the following:

Name of horse: \_\_\_\_\_

Location of horse now: \_\_\_\_\_

Have you ever adopted a horse from Sweetbeau Horses under another last name?

Yes  No

If **Yes**, please provide last name: \_\_\_\_\_

Do you currently own other horses?

Yes  No

If **Yes**, please complete the following:

Breed	Gender	Age	Discipline / Sport

Who will provide daily oversight and care of horse (i.e. check for injuries, feed, water, blanket, etc.)?

\_\_\_\_\_

What is the physical location where the horse will be kept (if different from above)?

\_\_\_\_\_

Will horse be alone or with other horses, please explain:

\_\_\_\_\_



Where will your horse be kept (check all that apply)?  Barn Stall  Corral  Pasture

If **Corral**, provide the following dimensions in feet:

Length: \_\_\_\_\_

Width: \_\_\_\_\_

Height: \_\_\_\_\_

Gate Height: \_\_\_\_\_

Gate Width: \_\_\_\_\_

Materials used in Corral: \_\_\_\_\_

Materials used in Gate: \_\_\_\_\_

If **Pasture**, provide the following:

Describe your fencing: \_\_\_\_\_

Size of pasture: \_\_\_\_\_

Number of horses in pasture: \_\_\_\_\_

Type of shelter?  Barn Stall  Multi-sided Lean To  Roof only Shelter

Source of water?  Well  City

Daily Water access?  Automatic Water  Creek/Pond  Bucket / Trough

Describe type of hay or pasture forage: \_\_\_\_\_

Amount of hay per day (feeding): \_\_\_\_\_

Describe any supplemental feed: \_\_\_\_\_

Do you own a horse trailer?  Yes  No

Please list your current Horse Care Providers:

Provider	Name	Phone	# of years working with
Vet			
Ferrier			
Dentist			
Trainer			
Other			

Have you had a horse under veterinarian care in the past?  Yes  No



Describe the vet treatments your horse received.

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What worming product(s) do you use? \_\_\_\_\_

How often do you worm your horses? \_\_\_\_\_

How often are your horses teeth floated? \_\_\_\_\_

What type of footcare do you prefer?  Shoes  Barefoot

If **Shoes**, how frequently is your horse re-shoed? \_\_\_\_\_

**References**

Please list up to three (3) Riding Clubs / Organizations you are a member of:

Club / Organization Name	Contact	Phone Number

List three (3) personal references you have a 3+ year relationship with: People you ride horses with; individuals you have bought or sold horses too; boarding facilities or trainers you've worked with.

Name	Relationship	Phone Number

Please provide your current employer information:

Employer Name	Address	Supervisor	Phone Number

I declare that the information provided by me on the above form is true and accurate.

Applicant's Full Name (Print Full Name)	Date
Applicant's Signature	Date



Sweetbeau Horses Approver (Print Full Name)	Date
Sweetbeau Horses Approver Signature	Date

How will horse be transported to your location? \_\_\_\_\_

What specific service provider will you use to transport? \_\_\_\_\_



## EQUINE CARE TERMS AND CONDITIONS

I, \_\_\_\_\_ (herein after referred to as "Adopter"), hereby agree to abide by and comply with the following terms and conditions set forth herein. I understand and agree that failure to comply with these terms and conditions will result in the revocation of my right to retain ownership of the horse.

1. Adopter is legally and financially responsible for providing proper care and shelter. Adopter is to guard and protect the horse in his / her care from being subject to harm or endangerment, negligence, harassment or outright abuse.
2. "Abuse" as used herein shall mean physical aggression, the withholding of food, water, or shelter and/or emotional neglect. Horses shall be provided with other suitable equine companions at all times, sufficient room and/or habitat to move, roll, play and exercise at will on a daily basis.
3. Horse(s) shall have unlimited access to clean water at all times, shelter and appropriate feed to maintain healthy and humane standard of health and well-being.
4. Adopter agrees to treat the horse humanely and with kindness, dignity and respect at all times.
5. Adopter agrees to maintain the horse(s) hooves, teeth and manage parasites.
6. Adopter agrees to refrain from hard/challenging riding of the horse until it reaches 4 years of age.
7. Adopter agrees not to use severe training tools or aides such as severe bits.
8. Adopter agrees not to breed the horse.
9. Adopter agrees not to use horse for rodeo's, other than events which horse will be performing.
10. Adopter agrees never to rope or "trip" the horse for sport or in any form for training.
11. Adopter agrees to never send the horse to auction or sell/surrender to anyone suspected of representing kill buyers or slaughterhouse.
12. Adopter agrees never to remove or alter a BLM brand or freezemark.
13. Adopter agrees not to brand horse without Sweetbeau Horses permission.
14. Adopter is responsible, as provided by State law, for any personal injury, property damage, or death caused by the animal in Adopter's care, for pursuing horse(s) that escape or stray, and for cost of recapture. Adopter will hold harmless Sweetbeau Horses as provided by State law, for any personal injury, property damage, or death caused by the foster animal in Adopters care, for pursuing horses that escape or stray, and for cost of recapture.



15. Sweetbeau Horses retains the right to inspect at any time the premises where the horse is being kept with seven (7) day notice for routine checks and without notice if there has been a complaint or concern for neglect or abuse.
16. Adopter shall not transfer horse for more than thirty (30) days to another location or to the care of another individual, other than training for a specified period, without the prior approval of an authorized representative of Sweetbeau Horses.
17. Should extreme hardship circumstances arise where Adopter is no longer able to care for the horse, Sweetbeau Horses is to be immediately notified.
18. In the event Adopter locates a prospective "replacement" adopter, Sweetbeau Horses retains the right to screen all potential candidates and retains the exclusive authority to extend acceptance of, or to decline, the candidate. The new Adopter must agree to the terms and conditions of care / ownership set forth herein by Sweetbeau Horses.
19. In the event that the Adopter can no longer care for the horse, the horse shall be returned to Sweetbeau Horses. The Adopter agrees to pay all costs involved in care and transporting the horse back to Sweetbeau Horses facility in Creston, CA.
20. In the event that the horse's life must be terminated due to injury or illness, Sweetbeau Horses must be notified immediately. Euthanasia must be done in a humane manner by a licensed veterinarian. A veterinarian needs to document that further medical intervention would not help the horse and euthanasia is the only humane option. Documentation of the euthanasia must be provided to Sweetbeau Horses within seven (7) days post procedure.
21. Adopter will notify the authorized representative of Sweetbeau Horses within 24 hours via telephone or e-mail of discovery of the horse's death, theft or escape within three (3) days. The owner shall be responsible for any expenses incurred by the death of the horse and its subsequent legal disposal.

I acknowledge that I am at least 18 years of age or older and have read and understand the Equine Care Terms and Conditions and will comply;

Applicant's Full Name (Print Full Name)	Date
Applicant's Signature	Date
Sweetbeau Horses Approver (Print Full Name)	Date
Sweetbeau Horses Approver Signature	Date