



Equine

Welcome to the New Hampshire SPCA

The NHSPCA requires that all adoption applications be submitted with photographs of the turnout/pastures, fencing, barn and stalls, and any other equines residing at the facility where the NHSPCA equine will be kept.

Please complete the following information in full:

Full Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Home/Cell Phone: _____ Email Address: _____
Work Phone: _____ Occupation: _____
Place of Work: _____
Preferred Method of Contact: <input type="checkbox"/> Phone <input type="checkbox"/> Email

ADOPTION APPLICATION:

1. If there is a specific equine you are interested in, please state the name: _____

2. Please indicate any height, age, and temperament preferences you may have for an equine:

Height: _____--_____ Age: _____--_____ No Preference

Temperament: *(please circle all that apply)*

Quiet	Easy-Going	Hot	Inexperienced
Beginner-Friendly	Training-Prospect	Young/Athletic	Show-Prospect
Experienced	Older/Retired	Companion Type	

2. Please list the name, address, and telephone number of your current veterinarian and farrier that will be caring for the equine:

Veterinarian: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Farrier: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip Code: _____

4. Please list the names, addresses and telephone numbers of two non-family references familiar with your equine experience and care:

Reference 1: _____

Phone: _____ Email: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Reference 2: _____

Phone: _____ Email: _____

Address: _____

City: _____ State: _____ Zip Code: _____

5. Who will care for the equine in the event that you are sick, injured or otherwise unable: _____

6. Please describe your experience with equines: _____

7. Have you or do you currently own and care for equines? Yes No

Please describe: _____

8. Do you own a horse trailer? Yes No

If no, do you have access to a horse trailer you may use? Yes No

9. What is the intended use for this equine? Please circle all possible answers and provide details below:

Trail Riding	Dressage	Jumping	Showing
Lesson Program	Western	Companion Only (no riding)	

10. Will the equine be stabled on your own property? Yes No

If you answered yes, please answer the following:

A. Is your property zoned for equine or farm animals? Yes No

B. How many acres do you own? _____

C. How many pasture/turnout acres will the equine have? _____

D. Total number of equines on the property: _____

11. If the equine will be stabled at a boarding facility, or on someone else's farm or property, please provide the following information:

A. Name of the boarding facility or farm: _____

B. Name of the owner of the boarding facility or farm: _____

C. Address of the facility or farm: _____

D. Telephone number of the boarding facility or farm: _____

12. Are you aware of the financial responsibility of owning a horse? Yes No

(Estimated costs of owning a horse are between \$3,000 and \$6,000 per year.)

13. Have you ever surrendered an animal or been charged with animal abuse or neglect? Yes No

If yes, please describe: _____

14. Do you agree not to breed this equine? Yes No

15. In the event that the equine should develop challenging behaviors (i.e. kicking, rearing, charging, etc.) or health complications (i.e. Cushings Disease, soft tissue injury, Navicular Disease, etc.) do you agree to consult with your veterinarian, trainer and/or the New Hampshire SPCA regarding these issues? Yes No

If no, please explain: _____

AGREEMENT:

Will you agree to the following NHSPCA Farm Program adoption requirements? Please sign and date below:

1. If you cannot keep or continue to care for the adopted equine, you will notify the NHSPCA immediately and return the equine, at no charge, to the NHSPCA.

A. Should the NHSPCA have space limitations, you agree to give the NHSPCA 1 month to make room for the equine

OR

B. The NHSPCA will work with you to place the equine in a suitable home per NHSPCA adoption requirements

OR

C. You will grant the NHSPCA first right of refusal before selling the equine with the understanding that the contract you signed upon adoption will transfer to the equine buyer and a copy of the transferred contract with appropriate signatures and dates will be provided to the NHSPCA within one week of completed purchase.

Signature: _____ Date: _____

I, _____, the undersigned, understand that I am applying to adopt an equine from the NHSPCA. I agree that I have read and understand the adoption terms and responsibilities, including those requiring financial, time, training and labor commitments. I also understand that I must complete the application process and my facility (home or boarding facility) must be approved before I am allowed to adopt an equine from the NHSPCA. I agree not to hold the NHSPCA liable in the event of injury, death, or damage to any human, animal or property as a result of activities or actions of the equine I adopt.

**I HAVE CAREFULLY READ, CLEARLY UNDERSTAND, AND VOLUNTARILY SIGN THIS
ADOPTION APPLICATION AGREEMENT.**

Signature: _____ Date: _____

*When completed, please return this form to the NHSPCA, c/o Carrie Fyfe, Equine and Farm Program Manager:
104 Portsmouth Ave, Stratham, NH 03885, fax number: 603-778-7804, or email to farmprogram@nhspca.org*