### RETURN TO FREEDOM ADOPTION APPLICATION

Please read the Adoption Care Terms & Conditions carefully before completing this application. Care of a wild horse is a significant and long-term commitment of time, money and energy.

It should be specially noted by all applicants that the instinctive protective mechanisms of wild horses are significantly more pronounced than that of the domestically raised horse. As a result of their finely tuned protective mechanisms, wild horses will respond to pressure much more readily and assertively than domestic horses. Their responses to pressure may include kicking, biting, rearing and striking out in an effort to protect themselves from a perceived threat. Anyone who is involved in the handling and training of a wild horse should be aware of this fact. Return to Freedom (RTF) requires that any handler or trainer be proficient in gentle, minimal force handling techniques.

Due to the unique nature of wild horses, we regret that we are unable to accept applications from individuals under the age of 18. An application may be submitted by the parent or legal guardian who thereby agrees to be fully responsible for the horse's welfare.

## **Prospective Adopter Information:** Address: Mailing Address (if different from above): Telephone # (Home): \_\_\_\_\_ (Work): Fax #:\_ \_\_\_\_ E-Mail Name of Employer: \_\_\_\_\_\_ Telephone #\_\_\_\_\_ Years with employer: \_\_\_\_\_ **Personal References:** Name: \_\_\_\_\_\_ Telephone #: \_\_\_\_\_ Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_ Address: Address: **Experience with Horses** What is your experience with horses? Have you previously owned a horse? Yes/No If "yes", for how long? \_\_\_\_\_ Where? What type of horse do you currently own or did you own?\_\_\_\_\_ Please state: Age: \_\_\_\_\_ Gender: \_\_\_\_\_ Year Acquired: \_\_\_\_\_ Length of Time Owned: \_\_\_\_\_ Do you still own the horse? Yes/No If you no longer own the horse, do you know where he/she is now? Yes/No

Please explain why you no longer have your horse:

# Return to Freedom Adoption Application, page 2 What discipline did you use your horse in? \_\_\_\_\_ What training methods and/or philosophies did you use? Have you changed any of your training methods and /or philosophies?\_\_\_\_ Have you attended any classes or clinics regarding the care and training of horses? Yes/No If yes, which classes and/or clinics have you attended?\_\_\_\_\_\_ Why do you want a wild horse?\_\_\_\_\_ Do you have experience with wild horses? \_\_\_\_\_\_. If so, please describe: \_\_\_\_\_\_ Please describe the method you will use to train your wild horse: **Care and Feeding:** Please describe your feeding routine (type of feed etc.):

Please describe your exercise and/or training routine:

Please describe your pasture/paddock maintenance routine:

Will your horse be alone or will he/she have the companionship of other horses? Yes/No

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Who will be responsible for caring for the horse?	P (Please indicate age and experience level)
Who will be responsible for the horse's care in the	ne event you are sick or are away on vacation?
Do you have sufficient time and income to suppo	ort a horse on a long term basis?
	outine would be in caring for & interacting with your horse?
Type of animal you are requesting, please circle:	
Gender: Stallion, Mare, Mare with Foal	, Gelding.
Age: 1-5 Years, 5-10 Years, 10 Years or	older.
How do you plan to use your animal?	
Does the appearance of the animal matter to you	u? Yes/No
Will you accept an animal with physical problems	s? Yes/No
Will you accept an animal that cannot be ridden?	? Yes/No
Who will use the horse if it is to be ridden?	
(Indicate height, weight, and if a child, state age)	
	rider. To ensure the safety and compatibility of horse and rider, please
horses, etc.)	e. (i.e years riding, horseback riding lessons, experience with young, greer
Are you working with an instructor? Yes/No	
Name of Instructor:	Instructor's Phone Number:
Riding Discipline (i.e. Western, English, etc.)	
Name of Veterinarian:	Phone:
Name of Farrier:Phon	e: _
Please describe the location of where the horse	is to be kept

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riease describe your paddock/ pas	ture maintenance routin	e			
Do you have fresh water available	e at all times? Yes/No	Water Source:	(Circle One) Creek	Lake	WaterTrough
Do you have at least 400 square fo	eet for each animal you a	re applying for?			
What type of fencing do you have	?	Fence Height:_			
Is there adequate drainage in the Please provide specific directions					
Please provide photo of actual loc Do you own the place where the h	norse(s) will be kept? Yes	/No	ord:		
I,, state that I own	the property legally kno	wn as			
I,, state that I own  Name of Property		wn as			Address
	y Owner				
Name of Property	y Owner	, in the State of			
Name of Property	y Owner to have horses maintaine	, in the State of			
Name of Property in the County of And give my permission t Owner Name:	y Owner  to have horses maintaine Phone: (Printed)	, in the State of d on my property.		Street	Address
Name of Property in the County of And give my permission t Owner Name:	y Owner  to have horses maintaine Phone: (Printed)	, in the State of d on my property.		Street	Address
Name of Property in the County of And give my permission t Owner Name:	y Owner  to have horses maintaine Phone: (Printed)	, in the State of d on my property. te Signed:		Street	Address

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Horse (s) name(s)

I fully understand that I am legally responsible for horse that I adopt and I have read and agree to the Terms and Conditions of Return to Freedom's Adoption program.

I understand that the use and control of horses is a hazardous activity. If I am accepted as an Adopter, I release and indemnify Return to Freedom and its agents of all liability from damages to person or property caused by the horse in my custody, care and control.

I authorize you to verify all references, including veterinarian, trainers, farriers, landlord, employers, etc. named in this document. I also authorize you to perform a credit check and/or background investigation on myself or the proposed, named legal Adoption caregiver.

I also understand that the horses are not available for re-homing or sale and must be returned to Return to Freedom at my own expense should I not be able to continue to provide an adequate home or care for Adopted horse(s) or that any re-homing of the horse(s) must be approved in writing in advance by Return to Freedom.

I agree to contact RTF before giving away or selling a horse adopted through RTF (also applies to foals born to pregnant mares adopted through this program), and I will return the horse or horses to RTF at my expense instead if requested. I understand that to violate this condition will result in a \$1,000 per horse penalty. I also understand that RTF also has the option of approving any potential alternate adopter of a horse adopted through RTF and must be approved by RTF before leaving my care and control.

**PROHIBITED ACTS**: 1. Maliciously or negligently injuring or harassing an adopted horse; 2. Treating a horse inhumanely or subjecting horse to obscene behaviors; 3. Selling a horse, whether intentional or unintentional, for sale for slaughter; 4) selling, giving, leasing, or loaning a horse to another person deemed by Return to Freedom to offer inadequate living/housing conditions or where any animals on the property receive neglectful or abusive treatment.

The applicant does hereby warrant that the answers given in the "Return to Freedom Adoption Application" are to the best of his/her knowledge and belief, true and correct.

Due to the extensive costs involved in providing medical care, basic handling, routine maintenance and feeding, Return to Freedom respectfully requests an adoption fee per horse which will be determined on a case by case basis depending on level of training etc. This fee is non-refundable after two weeks or in the case of repossession due to breach of contract.

age

Gender

	RTF Representative /Print Name	Signature	Date	
	Print Name	Signature	Date	
4)				
3)				
2)				
1)				

#### REFERENCES

Please provide at least three references and include the following and any other notes or biographical information:
Full Name:
Address/Phone/ ContactInformation:
Relationship to adopter:
How long they have known you:
Notes:
Full Name:
Address/Phone/ Contact Information:
Relationship to adopter:
How long they have known you:
Notes:
Full Name:
Address/Phone/ Contact Information:
Relationship to adopter:
How long they have known you:
Notes:
Additional Notes: