

Horse Acceptance and Release Form

- 1. By signing this form, you are releasing your equine to Best Friends Animal Society. Please fill out this form completely and then return it to us, along with the following information:
 - A health certificate (from a veterinarian) and a current negative Coggins test. These are requirements for any equine entering the state of Utah from another state, but we ask that these documents be provided for any equine coming to the sanctuary, even from within Utah.
 - All previous veterinary and medical records, including radiographs (x-rays) if there are any.
- 2. It is your responsibility to arrange transportation to the sanctuary. Please contact us to arrange a day and time when the equine will arrive.
- 3. If you wish to provide continuing financial support for your equine, please send any donations to the address below with a note specifying that the funds are to be used for Horse Haven.
- 4. To be able to continue to take in equines in need, Best Friends Horse Haven makes every effort to adopt our equines into loving, forever homes. Our adoption process is very thorough; if you would like information about how we find homes for our equines, please let us know.

By releasing my equine to Best Friends Animal Society, I understand that my equine will be available for adoption and will be placed into an appropriate home if one becomes available. *Please write your intials here to indicate that you have read and understand this statement:*

Return all materials to:

Best Friends Animal Sanctuary Attention: Horse Haven 5001 Angel Canyon Road Kanab, UT 84741

Phone: (435) 644-2001, ext. 4869

Fax: (435) 644-2078

E-mail: horses@bestfriends.org

Please provide as much information as possible in response to the following questions. If you cannot answer the questions in the space provided, feel free to use additional paper or the backs of these pages (just note which question you are addressing). Your answers will assure the proper care of the horse and the safety of the other horses who currently reside at the sanctuary. Your answers to these questions will not determine whether or not we will accept the horse.

Your Horse's Information	ation		
Name	Age	Breed	
Markings			
If this horse is a gelding, h	ow long has he been g	elded?	
Your Horse's History			
How long have you had the			
Tell us as much as you can	about the history of the	ne horse before you acqui	red him/her.
Tell us as much as you can	•	•	
Is the horse currently being			
How often is the horse wor	rked?		
How is the horse worked?			
What is the length of the a	verage workout?		
What type of tack has been	used on the horse? _		
What level of experience of the horse?			opt and/or handle

How is the horse with people?
Is this horse appropriate for a child to ride or interact with?
How are his or her ground manners?
How is the horse to catch?
How is the horse to saddle?
How does the horse load into a trailer?
How does the horse handle for the vet and the farrier?
If the horse can be ridden, how is he or she to ride?
How is the horse with other horses?
What is the horse's normal status in a herd? ☐ Dominant ☐ Submissive ☐ Mixed
The horse gets along with: Mares Geldings Both
The horse does not get along with: Burros Mules Goats Dogs Cattle
□ Llamas □ Other:
Please tell us as much as you can about any behavioral issues the horse may have, and how you have been working with them.
Please describe the type of facility the horse is used to living in (stall, corral, pasture).
Please describe the type(s) of fencing the horse is used to.
What are you feeding the horse and what is the feeding schedule?

Please describe in as much detail as possibl horse.	e your perception of the ideal person and situation for this
Your Horse's Health Information	
	our horse, please give us some specific information about the o help with some of the answers, we would appreciate it if you
Name of veterinarian	Phone
Date of last worming	
Types of vaccinations given	
What is the general condition of the horse's	mouth?
Name of farrier	Phone
	feet?
Does the horse go barefoot or is he/she show	d?
Are there any lameness issues? Yes	No If yes, please describe.
How is the overall health of the horse? Plea	se describe any conditions that are being treated.
Is there a history of any of the following?	
☐ Colic ☐ Founder ☐ Vesticular stomatit☐ Other	

		s the horse has that will require care.
Is the horse on any medication	ons now? Yes No If	yes, what are they?
Is the horse on any suppleme	ents now? Yes No If	yes, what are they?
In your opinion, is this a spec	cial-needs horse?	No
If yes, please describe what y	you consider to be his/her spe	ecial needs.
Varia Cantaat Informat	ian.	
Your name		
Your nameOrganization (if any)		
Your nameOrganization (if any)Address		
Your nameOrganization (if any)AddressCity	State	Zip
Your name Organization (if any) Address City Home phone	State Time you can be	
Your name Organization (if any) Address City Home phone	State Time you can be Fax_	zereachedZip
Your name Organization (if any) Address City Home phone	State Time you can be	zereachedZip
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Your nameOrganization (if any)Address CityHome phone Work phone I hereby releaseAnimal Society. I declare that ownership or control of the a of the above animal as of the	StateTime you can beFax **** (animal's name to I obtained the above animal bove animal. I hereby agree to date below.	E-maile) into the custody and control of Best Friel legally and that I waive all future rights in
City	State Time you can beFax **** (animal's name of I obtained the above animal bove animal. I hereby agree of date belowDate	Zip