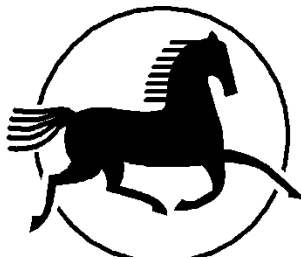


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FOUR CORNERS EQUINE RESCUE

C.R. 3334
AZTEC, N.M. 87410
334-7220 phone

ADOPTION APPLICATION

NAME _____ DATE _____

PHYSICAL ADDRESS _____

MAILING ADDRESS _____

CITY, STATE, ZIP CODE _____

PHONE (HOME) _____ PHONE (WORK) _____

CELL PHONE NUMBER _____

Email Address: _____

1. Is this your first horse? If no, please list others currently or previously owned, and length of ownership.

2. Have you sold any horses in the past 5 years? If so, why?

3. Will you be the sole caretaker for this horse? - explain.

4. Will the horse be kept on your property? If yes, please describe facility. If no, give boarding location with phone number and describe.

5. Please list name and phone number of veterinarian.
6. Please list name and phone number of farrier.
7. Please list 2 references with address and phone number.
8. List what you plan to use this horse for.
9. Describe your feeding program.
10. If you own horses, please list your schedule for:
 - Farrier work:
 - Deworming:
 - Teeth Floating:
 - Vaccinations (what and when):
11. If this application is for a specific horse, please list the horses name here -

If not, please describe what you are looking for (i.e. Gender, breed, age, training, companion or riding horse).

An application fee of ten dollars (\$10.00) must accompany this application