 THE ANNA

**ASSOCIATION FOR NEEDY NEGELECTED ANIMAL**

SHELTER

**THE ANNA SHELTER - Equine Rescue Division**

9240 Route 6N Albion Pa 16401 814-520-2797

[www.theannashelter.com](http://www.theannashelter.com)

This is not the adoption contract. Upon approval, an adoption contract will be signed on the day of adoption if the application is approved.

This application may be denied for any reason and is subject to approval by all Equine board members. If the application is denied, no reason will be given, but all applicants are welcome to reapply after 90 days of a denial if they feel their situation has altered enough to be re-considered for approval once again.

Once the application is approved, you will be notified to schedule a meeting with us at our facility to meet the horse/horses available.

Equine Adoption Application

Date:

Application For:

Applicants Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State/Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Your Date of Birth(Age)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Applicants must be 18 years or older ID required**

* Is your home a: House\_\_\_\_\_ Apartment \_\_\_\_\_ Mobile Home \_\_\_\_\_\_ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Do you: \_\_\_\_\_ Own or \_\_\_\_\_\_ Rent? How long have you lived here?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* If you rent what is your landlord’s name and phone number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Are you a student?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Do you live alone?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Who else lives in the household?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Are there children in the household?\_\_\_\_\_\_\_\_\_ If yes list the ages”\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Are you currently employed?\_\_\_\_\_\_\_\_ Where:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* For how long:\_\_\_\_\_\_\_\_\_\_\_ Primary Source of Income:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have any other pets/ horses: If yes, please list them:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Are your pets/horses current on vaccines?**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What vet do you/or do you plan to use?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How will you keep your horse on your property?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Have you ever adopted a pet before? \_\_\_\_\_If yes from where?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever surrendered or given up a pet in the past?\_\_\_\_\_\_\_ Why?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Where will the horse reside?**

(Name/Address of Facility)

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**Is this your property or are you boarding?**

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**Will the horse be living alone or with other horses/animals?**

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**Have you ever been investigated for, charged with or convicted of animal abuse?**

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**What are you looking for in an Adoptive Equine?**

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***Current Equine Information:***

**How many horses/ponies/donkeys do you currently have? Are they pasture pets, or do you ride, show, trail ride ect with them?**

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***Equine Experience:***

**How would you describe your riding abilities and equine experience?**

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***References:***

**Equine or Pet Veterinarian Reference’s Name and Telephone Number:**

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**Equine Farrier Reference’s Name and Telephone Number:**

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**Additional Reference Name and contact method and Type-of reference:**

(Possible alternative references can include: trainer, riding instructor, stable manager, equine dentist, vet tech in practice with establish veterinary practice)

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**Additional Comments:**

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**I understand that I must complete the application procedure and potentially have the equine property or boarding facility inspected and approved before being allowed to adopt an equine from ANNA. I understand that I may not be able to adopt the equine I am interested in for various reasons. No reasons will be disclosed if the application is denied and I agree to not request this information and to remain courteous if declined. I am welcome to submit a new application after 90 days. I understand that ANNA will check to verify my personal information and references. I agree to hold ANNA Shelter its board, directors, fosters and all affiliates blameless and free of any liability should I be approved to adopt from this organization and visits any of the facilities where rescue horses are located and incur any injury while visiting the equines whether while riding or handling the horses in any manner.**

**By signing this application, I agree that I have read and understand the Contract and Adoption Policy of The ANNA Shelter Equine Rescue Division. Your signature allows us to verify that the information given is accurate and true. Failure to provide accurate information will forfeit my application.**

**X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***\*\*\*\*We reserve the right to deny an applicant for any or no reason. Our goal is to find the best possible match for our equine rescues and place them into lifelong committed homes. We appreciate your understanding.***