

## **ADOPTION PICK UP - FORMS**

### **3 FORMS:**

1. **Horse Leaving Form - Checks the condition of the horse.**  
(adopter or shipper reviews and signs-we keep)
2. **Adopter's Checklist - Revisits agreement.** (adopter signs at pickup or the SHIPPER takes to the adopter, it also gets mailed w Adoption Packet)
3. **Horse's Information - Level of riding use, health history.**  
(adopter signs at pickup or the SHIPPER takes to the adopter, it also gets mailed w Adoption Packet)

## Standardbred Retirement Foundation

**Horse Leaving**

- Put signed copy in horse's folder
- Take photos

Horse \_\_\_\_\_ Date \_\_\_\_\_

Shipping to Name and address:

\_\_\_\_\_

**Staff to do checklist:**

- \_\_\_ Check Temperature
- \_\_\_ Paperwork
- \_\_\_ Grain
- \_\_\_ Take Photos w Adopter or as leaving.

Review With Shipper-Adopter-mark yes or no.

Any answers that are no should be discussed with SRF before leaving

- \_\_\_ Is temp under 102 degrees?
- \_\_\_ If any nasal discharge, is it clear?
- \_\_\_ Does the horse trot off sound?
- \_\_\_ If a Health Cert is necessary, did you receive it with the Coggins?
- \_\_\_ Overall does this horse look adequate?
- \_\_\_ Did you receive a ¼ bag of grain

Shipper or Adopter:

Name \_\_\_\_\_ Tele \_\_\_\_\_

Signature \_\_\_\_\_

Standardbred Retirement Foundation  
**Adopter Checklist**

- Review with adopter and have adopter sign,
- take photo email to adopter now,
- file original in horse's folder

I, \_\_\_\_\_ Understand and agree to the following  
 (Print name)

pertaining to \_\_\_\_\_  
 (Horse Name)

	Initial
Horse will be kept in fleshy condition Henneke Scale 5-6.	
<u>Vet follow-up forms</u> must be completed by veterinarian and provided to SRF semi-annually.	
The Horse will have <u>annual dental care</u> .	
Horse will be provided a <u>minimum of a three-sided shelter, water and hay or grass 24 hrs a day</u> .	
From the time I take possession of the named horse, <u>I am responsible for all care, including veterinary and farrier</u> .	
I will inform SRF if and where I would like to move my horse prior to <u>moving for confirmation</u> .	
My intent is to provide this horse a lifetime loving, I <u>cannot give away, sell, lease, race, breed, or use the named horse for commercial purposes</u> .	
If the horse passes away or requires humane euthanasia by a licensed veterinarian, I will submit a veterinarian's statement documenting reasons/causes.	
Euthanasia will only be performed by a licensed veterinarian.	

\_\_\_\_\_  
 (Adopter's Signature, must be 18 years of age or older)

\_\_\_\_\_  
 (Date)

## Standardbred Retirement Foundation

**Horse's Information**

- **Review This completely with adopter**
- **adopter sign,**
- **take photo of this, email to adopter now,**
- **file original in horse's folder**

Adopter's Name \_\_\_\_\_ Horse \_\_\_\_\_

Companion Horse Only

Light Driving, No Rider

Ride 1-2 times/week, W/T, light rider 150-160

Ride 1-3 times/week, W/T, Light Rider 150-160#

Ride 3-5 times/week, light rides, easy trail riding, W/T

Ride 3-5 times/week, W/T/C

Ride everyday W/T/C

Full use horse, free from injury

Type of Bit \_\_\_\_\_

Feeding regimen \_\_\_\_\_

Last Farrier Date \_\_\_\_\_

On Lush Grass? \_\_\_\_\_ If no then gradually introduce by a couple of hours per day for at least a week or more.

Date Last wormed/Wormer Used \_\_\_\_\_

Dental History \_\_\_\_\_

Vaccines History \_\_\_\_\_

Comments \_\_\_\_\_

\_\_\_\_\_  
(Adopter's Signature, must be 18 years of age or older)

\_\_\_\_\_  
(Date)