

HOOVED ANIMAL RESCUE & PLACEMENT, INC.

ADOPTION APPLICATION

Thank you for your interest in our Adoption Program. This program places a HARP animal into a new home for permanent care. This application does not obligate you to take any particular animal(s) at any particular time, but is needed prior to you adopting a HARP animal.

1. Person(s) who wish to adopt animal(s):

Name: _____

Address: _____

Mailing Address if different: _____

Phone: (day) _____ (night) _____ (cell) _____

Name: _____

Address: _____

Mailing Address if different: _____

Phone: (day) _____ (night) _____ (cell) _____

2. Will children have access to the animal(s)? ☐ Yes ☐ No If yes, what age(s): _____

3. What type of animal(s) do you want to adopt? ☐ Horses ☐ Goats ☐ Cattle ☐ Pigs

☐ Other (specify) _____

4. If horses, who will be riding this animal? _____

5. Do you have any particular need/request for this type of animal? _____

6. What experience do you have with this/these animals? _____

7. Where will the animal(s) be kept? _____

8. How many animals do you feel you could adopt at one time? _____

9. What type and how many animals do you currently have? _____

10. Are your current animals current on their vaccinations? ☐ Yes (please provide records) ☐ No

11. If you have horses, we require proof of negative Coggins test performed within the last year.
Current (-) Coggins has been provided ☐ Yes ☐ No

12. Name and telephone number of your veterinarian(s):

13. If you have animals which require farrier work, who is your farrier(s)? _____

14. References:

A. Name: _____
Relationship to Applicant: _____
Telephone Numbers: _____
How long have they known you? _____

B. Name: _____
Relationship to Applicant: _____
Telephone Numbers: _____
How long have they known you? _____

C. Name: _____
Relationship to Applicant: _____
Telephone Numbers: _____
How long have they known you? _____

14. Have you ever had animals legally taken from your ownership due to neglect or cruelty?

☐ Yes ☐ No If yes, explain: _____

By signing this application I/we agree to a pre-placement assessment of the housing area for the adopted animal(s). I/we also agree that my veterinarian can release information regarding the healthcare history of my personal animals to HARP, and that the references I have listed above can speak with a HARP representative. I understand that upon the actual adoption of a HARP animal, I will be asked to sign an additional contract outlining specific provisions for adoption. HARP does not provide feed, veterinary, farrier or other care to animals following an adoption. I understand that HARP makes every effort to transfer information and records about their animals but does not guarantee the personality, mannerisms or safety of any animal.

I have read and agree to the above: _____
Signature Date

I have read and agree to the above: _____
Signature Date

☐ Approved ☐ Denied ☐ Pending HARP Representative _____

Comments: _____
