

RETURN TO FREEDOM FOSTER CARE APPLICATION

Please read the Foster Care Terms & Conditions carefully before completing this application. Foster care of a wild horse is a significant and long-term commitment of time, money and energy.

It should be specially noted by all applicants that the instinctive protective mechanisms of wild horses are significantly more pronounced than that of the domestic horse. As a result of their finely tuned protective mechanisms, wild horses will respond to pressure much more readily and assertively than domestic horses. Their responses to pressure may include kicking, biting, rearing and striking out in an effort to protect themselves from a perceived threat. Anyone who is involved in the handling and training of a wild horse should be aware of this fact. Return To Freedom requires that any handler or trainer be proficient in gentle, minimal force handling techniques.

Due to the unique nature of wild horses, we regret that we are unable to accept applications from individuals under the age of 18. An application may be submitted by the parent or legal guardian who thereby agrees to be fully responsible for the horse's welfare.

Prospective Foster Caregiver Information:

Name: _____

Address: _____

Mailing Address (if different from above): _____

Telephone # (Home): _____ (Work): _____ Fax #: _____ E-Mail: _____

Social Security #: _____ California Driver's License #: _____

Name of Employer: _____ Telephone # _____ Years with employer: _____

Personal References:

Name: _____ Telephone #: _____ Name: _____ Telephone #: _____

Address: _____ Address: _____

Experience with Horses

What is your experience with horses? _____

Have you previously owned a horse? Yes/No If "yes", for how long? _____ Where? _____

What type of horse do you currently own or did you own? _____

Please state: Age: _____ Gender: _____ Year Acquired: _____ Length of Time Owned: _____

Do you still own the horse? Yes/No If you no longer own the horse, do you know where he/she is now? Yes/No

Please explain why you no longer have your horse: _____

What discipline did you use your horse in? _____

What training methods and/or philosophies did you use? _____

Have you changed any of your training methods and /or philosophies? _____

Have you attended any classes or clinics regarding the care and training of horses? Yes/No
If yes, which classes and/or clinics have you attended? _____

Why do you want a wild horse? _____

Do you have experience with wild horses? _____. If so, please describe: _____

Please describe the method you will use to train your wild horse: _____

Care and Feeding:

Please describe your feeding routine (type of feed etc.): _____

Please describe your exercise and/or training routine: _____

Please describe your pasture/paddock maintenance routine: _____

Will your horse be alone or will he/she have the companionship of other horses? Yes/No

Who will be responsible for caring for the horse? (Please indicate age and experience level) _____

Who will be responsible for the horse's care in the event you are sick or are away on vacation? _____

Do you have sufficient time and income to support a horse on a long term basis? _____

Please describe what you anticipate your daily routine would be in caring for & interacting with your horse? _____

Type of animal you are requesting, please circle:

Gender: Stallion, Mare, Mare with Foal, Gelding.

Age: 1-5 Years, 5-10 Years, 10 Years or older.

How do you plan to use your animal? _____

Does the appearance of the animal matter to you? Yes/No

Will you accept an animal with physical problems? Yes/No

Will you accept an animal that cannot be ridden? Yes/No

Who will use the horse if it is to be ridden? _____

(Indicate height, weight, and if a child, state age).

Please give level of riding experience of each rider. To ensure the safety and compatibility of horse and rider, please provide as much useful information as possible. (i.e years riding, horseback riding lessons, experience with young, green horses, etc.)

Are you working with an instructor? Yes/No

Name of Instructor: _____ Instructor's Phone Number: _____

Riding Discipline (i.e. Western, English, etc.) _____

Name of Veterinarian: _____ Phone: _____

Name of Farrier: _____ Phone: _____

Please describe the location of where the horse is to be kept. _____

Where will your horse be kept? Please circle: Stall Corral Paddock Pasture

Please describe your paddock/pasture maintenance routine. _____

Do you have fresh water available at all times? Yes/No Water Source: (Circle One) Creek Lake Water Trough

Do you have at least 400 square feet for each animal you are applying for? _____

What type of fencing do you have? _____ Fence Height: _____

Is there adequate drainage in the paddock or pasture during the rainy season? _____

Please provide specific directions to the location where the horse will be kept. _____

Please provide photo of actual location where horse will be kept.

Do you own the place where the horse(s) will be kept? Yes/No

If renting facilities, please have the following portion completed by your landlord:

I, _____, state that I own the property legally known as _____,

Name of Property Owner

Street Address

in the County of _____, in the State of _____.

And give my permission to have horses maintained on my property.

Owner Name: _____ Phone: _____

(Printed)

Signature of Owner: _____ Date Signed: _____

How do you plan to transport the horse(s)? _____

Please describe the type of trailer you will be using to transport and the distance you will be covering: _____

Are you prepared to meet all costs involved in transporting your horse? _____

I fully understand that I am legally responsible for horse that I adopt and I have read and agree to the Terms and Conditions of Return To Freedom's Foster program.

I understand that the use and control of horses is a hazardous activity. If I am accepted as a Guardian, I release and indemnify Return to Freedom and its agents of all liability from damages to person or property caused by the horse in my custody, care and control.

I authorize you to verify all references, including veterinarian, trainers, farriers, landlord, employers, etc. named in this document. I also authorize you to perform a credit check and/or background investigation on myself or the proposed, named legal foster caregiver.

I also understand that the horses are not available for re-homing or sale and must be returned to Return To Freedom at my own expense should I not be able to continue to provide an adequate home or care for fostered horse(s).

The applicant does hereby warrant that the answers given in the "Return to Freedom Adoption Application" are to the best of his/her knowledge and belief, true and correct.

Due to the extensive costs involved in providing medical care, basic handling, routine maintenance and feeding, Return to Freedom respectfully requests a minimum donation of \$1000.00 per horse. This fee is non-refundable after two weeks or in the case of repossession due to breach of contract.

Horse (s) name(s)	Gender	age
1)		
2)		
3)		
4)		

(Print Name)	Signature	Date
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REFERENCES

Please provide References and include the following and any other notes or biographical information.:

Relationship to the individual How long they have known you Contact Information

NOTES:

(Print Name)

Signature

Date

