



# Adoption Application

S 6039 Pedretti Lane  
De Soto, WI 54624  
(608) 689-2399

Dear Horse Lover:

How do you adopt a horse through the American Standardbred Adoption Program (ASAP)? Read, print and complete Part One of this form, and then send it to us along with a \$5.00 application fee. We will then process your application and notify you once you are approved. **NOTE: You must have a vet, farrier, and personal reference to be approved.** Adoption fees vary according to location and condition of each individual horse, but fees most often range from \$350 - \$800. Adoption fees help defray the costs of services pertaining to the adoption process and are nonrefundable. **ASAP, Inc. is a nonprofit organization and cannot give monetary refunds.** After two years of following all contract regulations, ASAP, Inc. may allow your adopted horse to become your official property.

*This form has two parts: 1) Application/Placement Contract, and 2) Horse Information. The first part must be completed, signed and sent with the \$5.00 application fee to the address at the bottom of this form for processing. The second part will be completed after approval and at the time of placement.*

Part One: Application and Placement Contract		
<i>Section I: Application Form</i>		
A. CONTACT INFORMATION		
Your Name (last, first, middle initial):	Email:	
Your Parents' Names (if you are under 18 years of age):		
Street Address:	City & State:	Zip Code:
Home Phone:	Work Phone AND Cell Phone:	
Driver's License Number and State:	Social Security Number #:	
B. HORSE PREFERENCES		
Gender: <input type="checkbox"/> Gelding <input type="checkbox"/> Mare <input type="checkbox"/> Stud <input type="checkbox"/> No Preference		
Age Preference: <input type="checkbox"/> No <input type="checkbox"/> Yes <i>If yes, specify:</i>		
Color Preference: <input type="checkbox"/> No <input type="checkbox"/> Yes <i>If yes, specify:</i>		
Breed Preference: <input type="checkbox"/> No <input type="checkbox"/> Yes <i>If yes, specify:</i>		

Gait: <input type="checkbox"/> Pacer (more readily available) <input type="checkbox"/> Trotter <input type="checkbox"/> No Preference
Size: <input type="checkbox"/> 14-15 hands <input type="checkbox"/> 15-16 hands <input type="checkbox"/> 16+ hands <input type="checkbox"/> No Preference
What would you use the horse for primarily? <input type="checkbox"/> Pleasure/Trail Riding <input type="checkbox"/> Driving <input type="checkbox"/> Showing <input type="checkbox"/> Handicap or Youth Program <input type="checkbox"/> Other _____
Please check all that apply: <input type="checkbox"/> I am experienced and intend to train the horse under saddle, if necessary. <input type="checkbox"/> I would like to hire a trainer to work with the horse.
Are you interested and able to care for an injured horse? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you interested in not only adopting but also providing temporary foster care for horses in the program? <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>C. BACKGROUND INFORMATION</b>
Please briefly describe your previous experiences with horses and/or other animals (use back of page, if necessary):          
<b>D. RESPONSIBILITY FOR CARE</b>
Have you ever been responsible for the care of a horse before? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, please describe how long ago and to what extent:</i>
Will the horse be boarded on your property? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If no, provide information about the boarding facility below:</i>
Name:
Address:
Phone:
Who will be responsible for the daily care of the horse?
Describe in detail the shelter the horse will have:     
Size of turnout area:
Kind of fencing around turnout area:
What kind and how much hay will be provided per day?
What kind and how much grain will be provided per day?

What access will be provided for water?	
<i>If possible, please send pictures of your farm, shelter, and turnout area to ASAP, Inc. To ensure that horses have a good place to go, we may have to visit your facility before we can place a horse there.</i>	
<b>E. REFERENCES</b>	
<i>ASAP, Inc. requires references in order to consider an adoption. Do not use family members.</i>	
Veterinarian (If you do not currently own a horse, please list the small animal vet you use.)	
Name:	How long have you used this vet?
Address:	
Phone:	
Farrier (If you do not currently own a horse, please list a farrier you have contacted in your area.)	
Name:	How long have you used this farrier?
Address:	
Phone:	
Personal Reference	
Name:	How long have you known?
Address:	
Phone:	
Please sign below to verify that all of the information provided in sections A-E is truthful and accurate:	
➤ Applicant Signature:	Date:
➤ Parent or Guardian Signature (if under 18 years of age)	Date:
<b>Section II: Placement Contract</b>	
<ul style="list-style-type: none"> <li>• Please retain a copy for your records.</li> <li>• Please read carefully and sign where specified.</li> <li>• The adopter agrees to the following stipulations and conditions concerning an adoption through ASAP Inc.</li> </ul>	
<p>1. Once adopted, a horse remains the property of the American Standardbred Adoption Program. It may ONLY be transferred back to said program. Any sale or transfer of possession of named horse will result in the adopter being responsible for all attorney costs, rewards, and damages related to the return of horse to ASAP Inc. After two years of following all contract regulations, ASAP, Inc. may allow your adopted horse to become your official property. Please initial here to verify your understanding of this condition: _____</p>	
<p>2. During the adoption period, the horse may never be sold, given away, disposed of, or transferred to anyone but ASAP Inc.</p>	

3. Should a life-threatening condition arise, ASAP must be notified prior to any decision to euthanize said horse.	
4. Once an adoption fee has been paid in full, transportation costs to adoptive home or back to ASAP Inc. during the time frame of an adoption remain the full responsibility of the adopter.	
5. During the adoption period, the adopter may not release the horse from his/her care without consent of ASAP. If horse is relocated, ASAP must be notified. Failure to do so gives ASAP full right and responsibility to reclaim horse. The horse may never be raced.	
6. There are no monetary refunds on horses, and adopter understands that any horse coming back into ASAP's care will not justify a refund. An exchange on a horse will be considered if the horse being returned to the program is returned in good condition, soundness, and health.	
7. Basic needs requirement: Named horse needs proper feeding to maintain appropriate weight. Horse must have free access to water, a minimum three-sided shelter, and adequate and safe fencing.	
8. Required weight: Named horse must maintain a weight and condition as advised by licensed veterinarian.	
9. Required veterinary care: Inoculations must be administered by a licensed vet for the first full year after adoption. If you choose to vaccinate your own horse after this time, please state which vaccinations you will administer and how often. A. Worming and Hoof care: Worming done every eight weeks. Hoof care done every 6-8 weeks. B. April 1: Spring Inoculations: Eastern/Western Encephalitis, Tetanus, Rabies (suggested), Potomac, West Nile, and/or any other vet-recommended inoculations. C. October 1: Fall Inoculations: Flue, Rhino, Dental Care, and other vet-recommended vaccinations for endemic diseases. Illness/Injury: The adopter agrees to provide recommended vet care for illness and/or injury according to the horse's needs and/or according to requirements of _____ County and/or State of _____ law.	
10. The adopter agrees to forward a vet's statement of the horse's residence, condition, weight, teeth, and hoof condition at the time of spring and fall inoculations OR upon request.	
11. Horses can experience injuries or illness while in an adopter's care. Adopter understands and agrees that any and all injuries will be identified and treated while in placement, with financial responsibility being solely the adopter's responsibility. Failure to provide immediate medical treatment when needed will result in action taken by ASAP Inc. Life threatening situations require notifying ASAP Inc. by phone or email immediately. In the event of the death of a horse, adopter is REQUIRED to submit a death statement signed by attending veterinarian. Please initial here to verify your understanding of this requirement: _____	
12. Horses placed by ASAP Inc. include no guarantees pertaining to general condition, temperament, or soundness. Please be aware of this condition prior to adopting a horse. Initial here to verify understanding: _____	
<p><b><i>If the adopter fails to comply with any of the conditions or stipulations set here, ASAP Inc. reserves the right to regain possession of the horse. The adopter agrees to permit a representative of ASAP Inc. to visit the stabling property and the horse with prior notice. The adopter also agrees to allow ASAP Inc. to return a horse to the program if the well being of the horse is determined by ASAP representatives to be threatened.</i></b></p> <p>By signing below, I certify that I have read and accept the terms, conditions, and stipulations that pertain to the adoption and placement of a horse from ASAP, Inc. I understand that these terms, conditions, and stipulations apply to the horse (or horses) that will be listed in Part Two of this form at the time of placement. A copy of this agreement will be sent to you after an adoption has taken place.</p>	
➤ Applicant Signature:	Date:
➤ Parent or Guardian Signature (if under 18 years of age)	Date:

**COMPLETE PART ONE AND SEND WITH APPLICATION FEE TO:**

Susan Wellman, ASAP Director  
S 6039 A Pedretti Lane  
De Soto, WI 54624

# Part Two: Horse Information

*To be completed at time of placement*

Date of Placement:	
Horse Name:	Adoption Fee:
Age:	Payment Method:
Sex:	Tattoo Number:
Special Terms and Conditions, If Any:	
<p>I accept this horse under my care "as is" and agree to the terms and conditions of the placement contract as well as any listed above. Should I need to return this horse to the program within the next 14 days, I understand I will receive credit for the adoption fee I have paid, which may be put toward the adoption of another horse only (no credit after this exchange period). I realize adoption fees help defray the costs of adoption services (e.g. boarding, transportation, training, placement, etc.) and do not constitute purchase of the horse but rather adoption with all its privileges and responsibilities.</p> <p style="text-align: center;">← Please Initial Here</p>	
Adopter's Full Name (please print):	
➤ Adopter's Signature:	Date:
➤ Parent or Guardian Signature (if under 18 years of age):	Date:
Authorized ASAP Representative Signature:	Date:

**American Standardbred Adoption Program Inc.**  
 S 6039 A Pedretti Lane  
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 (608) 689-2399  
[asapinc@mwt.net](mailto:asapinc@mwt.net) -- <http://www.4thehorses.com>