



Adoption Application

Farm Animals

Date: _____

1. Farm Animals you are interested in: _____

Personal Information

- ❖ Name: _____ Are you over the age of 18? **Yes:** _____ **No:** _____
- ❖ Address: _____
- ❖ City: _____ Township: _____
- ❖ State: _____ Zip: _____ County: _____
- ❖ Home Phone: _____ Work Phone (or Other): _____
- ❖ How long have you lived at the above address: _____
- ❖ If Less than 5 years:
 - Please fill in previous address if moved within the last 5 years:
- ❖ Address: _____
- ❖ City: _____ Township: _____
- ❖ State: _____ Zip: _____ County: _____
- ❖ How long were you at this address? _____
- ❖ ID #: _____ State of issue: _____ Type (**circle one**): Military State Drivers Lic.
- ❖ Address on ID: _____
- ❖ Date of Birth (day/month/year): _____ E-mail Address: _____
- ❖ Place of employment: _____ How Long: _____
- ❖ Supervisor's Name: _____ Contact Number: _____



- ❖ If Unemployed, or if you are a student, please list the source(s) of income: _____

- ❖ Do you live in a: House: _____ Trailer: _____ Apartment: _____ Other (explain): _____

- ❖ Do you currently: Rent: _____ Own: _____ Live with Parents: _____ Other (explain): _____

- ❖ Landlord / Property Manager's Name: _____
- ❖ Address: _____
- ❖ Phone Number: _____
- ❖ Do you have transportation for this animal? _____
- ❖ Have you ever been issued a warning / citation, or been convicted for humane violations?
Yes: _____ No: _____
- ❖ Have you ever sold a horse at auction? Yes: _____ No: _____
- ❖ What kind of farm animal are you interested in? Mare: _____ Gelding: _____ Cattle: _____
Goat: _____ Sheep: _____ Other: _____
- ❖ What specific type of horse are you interested in?
Age? _____ Breed Preference? _____ Range of training: _____
Pleasure: _____ Companion: _____ 4-H: _____ Show: _____ Other: _____
- ❖ Who will be responsible for the animal(s) feeding? _____
- ❖ Training? _____ General care? _____
- ❖ If you go on vacation, what would you do with this animal? _____
- ❖ If you had to move, what would you do with this animal? _____
- ❖ If you had to get rid of this particular animal, what would you do? _____
- ❖ How will the animal be kept? Stable: _____ Pasture: _____ Other: _____



- ❖ What kind of fencing is at the facility? _____
- ❖ How many acres? _____
- ❖ How much do you anticipate spending yearly for?
- ❖ Feed? _____ Farrier Care? _____ Veterinary Care? _____ Boarding? _____
- ❖ How often do you think a horse should be?
Wormed? _____ Receive Farrier care? _____
Have their teeth floated? _____ Receive Vaccinations? _____

Complete address where the animal will be kept:

- ❖ Address: _____
- ❖ City: _____ State: _____ Zip: _____
- ❖ Property owner's name : _____
Phone: _____

HORSES

Discuss your experience with horses.

- ❖ Riding: _____

- ❖ Handling: _____

- ❖ Training: _____

- ❖ Working with young or unbroken horses: _____



- ❖ Working with abused or neglected horses: _____

- ❖ Explain your intended use for this animal: _____
- ❖ How much time do you plan to spend with this horse? _____
- ❖ What kind of training do you plan for this animal? _____

- ❖ Do you have a trainer that you currently or plan to work with? **Yes:** _____ **No:** _____
Trainer's Name: _____
Phone: _____
- ❖ If there are problems in training, what help will you seek? _____

- ❖ All male horses must be gelded within 60 days. Females may be pregnant. Are you willing to deal with the added expense of these situations? **Yes:** _____ **No:** _____
- ❖ Do you realize that the horse you adopt may require extensive rehabilitation, including veterinary treatment, and may have pre-existing conditions which could affect it for the rest of its life?
Yes: _____ **No:** _____
- ❖ Are you familiar with the following?
 - ❖ Equine Infectious Anemia: **Yes:** _____ **No:** _____
 - ❖ Potomac Horse Fever: **Yes:** _____ **No:** _____
 - ❖ Eastern, Western and Venezuelan Encephalomyelitis: **Yes:** _____ **No:** _____
 - ❖ Rhinopneumonitis: **Yes:** _____ **No:** _____
 - ❖ Tetanus: **Yes:** _____ **No:** _____
 - ❖ Rabies: **Yes:** _____ **No:** _____
- ❖ Can you recognize the symptoms of colic? **Yes:** _____ **No:** _____



❖ Do you understand the need for regular hoof care? **Yes:** _____ **No:** _____

❖ Name of Veterinarian: _____

Phone: _____

❖ Name of Farrier: _____

Phone: _____

❖ Horses have a life expectancy of 30 years or more; Are you willing to accept lifelong responsibility for the horse you adopt? **Yes:** _____ **No:** _____

❖ Briefly explain why you wish to adopt a horse from the Adams County SPCA.

❖ Would you object to a follow-up visit by a Adams County SPCA staff member or qualified volunteer?
Yes: _____ **No:** _____

❖ Indicate any other farm animals you might want to adopt from the Adams County SPCA.

Donkey: _____ Pig: _____ Ducks: _____ Geese: _____ Chickens: _____ Guinea: _____

Peacock/hen: _____ Other: _____

❖ Please list (2) references **not** including family members:

1) Name: _____

Relation: _____ Phone: _____

2) Name: _____

Relation: _____ Phone: _____



Terms of Adoption

(Initial all spaces)

- ❖ I understand that this is an adoption and not a sale. _____
- ❖ I agree to notify the ACSPCA in writing of a new address to this animal in the event that the adopted animal is moved to a new location. This term also includes the adopters if they move as well. _____
- ❖ I understand that I am to provide adequate shelter, clean fresh water, appropriate nutrition and necessary veterinary care to maintain the optimum health of the animal, and abide by all anti-cruelty laws of the state in which it is kept. _____
- ❖ I will provide one acre of pasture for each animal in our care. Any horse must be watched carefully on pasture to avoid foundering. _____
- ❖ I understand that the premises where the animal will be stabled and the animal itself are subject to inspection by an agent of the Adams County SPCA or designated agent at any time and regular yearly inspections will be conducted. _____
- ❖ I understand that this animal can NEVER be bred, either deliberately or accidentally. _____
- ❖ I understand that this animal will NEVER be raced. _____
- ❖ I will provide a box stall for stabling this animal. A run in shed may be accepted with ACSPCA approval. _____
- ❖ I will not use barbed wire fencing on any enclosure for this animal and all Electric Fence as well as High Tensile fence must be marked or flagged for this animal to see. _____
- ❖ I understand that should I no longer be able to keep the animal that I am required to return the animal back to the Adams County SPCA. Should I give the animal away or sell the animal, legal action will be taken against me to retrieve the animal and I will be responsible for any costs and legal fees incurred by the retrieval. _____
- ❖ I understand that the animal may be removed from my possession should a ACSPCA agent find I am in violation of this agreement or for other reasons determined by agent that is in the best interest of the animal to be removed. _____
- ❖ I agree to send a yearly update including vet records and photograph of the animal. _____
- ❖ I agree to contact the ACSPCA should the animal develop a serious illness and / or if a veterinarian determines euthanasia is in the best interests of the animal. _____
- ❖ I understand that the Adams County Society for the Prevention of Cruelty to Animals is not able to give an guarantees on the health, training, or temperament of this animal and that the adoption fee(s) are not refundable under any circumstances. _____



- ❖ The ACSPCA will not transfer any registration papers or titles to an Adopter. A copy of the Registration Papers may be requested under special circumstances, but require approval by the Shelter Manager.

- ❖ Unanswered questions, incomplete answers, and/or false information may result in this animal's Adoption Application being denied. The Adams County Society for the Prevention of Cruelty to Animals reserves the right to refuse adoptions. _____
- ❖ I certify that the aforementioned information is true and correct to the best of my/our knowledge. _____

The following statements are a release of liability to the Adams County SPCA:

- ❖ The Adams County SPCA is not liable for any illness, injury, or death of animals on Adopter's property caused by an ACSPCA adopted animal.
- ❖ The Adams County SPCA is not liable for any damage done to Adopter's property by a adopted animal at any time beyond the signing of this contract.
- ❖ The Adams County SPCA is not liable for any personal injury to Adopter, Adopter's family, or anyone that is on the Adopter's property.
- ❖ The Adams County SPCA reserves the right to deny anyone at anytime the right to adopt an animal for any reason.

Print Name	Secondary Print Name
Signature / Date	Secondary Signature / Date

ADAMS COUNTY SPCA USE ONLY:

Advised background checks	Shelter Name	Date / Performed by	Result
1) Other shelter checks:	_____	_____	_____
2) Humane Complaint Check:	_____	_____	_____
3) Adoption History Check:	_____	_____	_____
4) Veterinarian Check:	_____	_____	_____
5) Manager's Approval / Denial	_____	_____	_____

****Manager must approve any adoption of a dog that is going to a family with kids below the age of 12 years.**

Reason for Denial: _____