

INTERNATIONAL PHOENIX FOUNDATION
Mountain States Horse Rescue and Rehab
8154 County Road 3
Joel, Colorado 80822

ADOPTION APPLICATION

Name		Date	
Address			
Address 2			
City, State, ZIP			
Home Phone		Work Phone	

Type of horse you are looking for:

Breed(s): _____

Age: _____ Sex: _____ Size: _____ Color: _____

What will the horse be used for (please circle all that apply)

- | | | | | |
|--------------|--------------------|------------------|---------------|----------|
| Trail Riding | Packing/Outfitting | Western Pleasure | Barrel Racing | Cutting |
| Reining | Stock/Ranch Work | 4-H/Pony Club | Hunter/Jumper | Dressage |
| Endurance | Saddleseat | Driving | Companion | |

Other _____

Is there a particular horse at MSHRR that you are interested in? _____

Would you be willing to adopt a horse with limitations (i.e., lameness, injury, etc.)? Please describe what you would/would not accept? Please note: most of the horses at MSHRR are NOT PERFECT, so be as specific as you can.

Facilities:

Where will the horse be kept (please circle)? Home Boarding Stable

If the horse is to be kept at **home**, please answer the following questions:

1. Shelter provided **Y** **N** Type (i.e., barn, shed, etc.): _____
2. Pasture available? **Y** **N** How many acres? _____
3. How many other animals on your property? _____

If the horse is to be **boarded**, please provide the name, address, and phone of the stable where it will be kept.

Name: _____

Address: _____

City, State, ZIP: _____

Phone number: _____

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References:

Have you ever sold any horses in the past? If yes, how many and why were they sold?

Who will be your **veterinarian**?

Name: _____

Address: _____

City, State, ZIP: _____

Phone number: _____

Your **farrier**?

Name: _____

Address: _____

City, State, ZIP: _____

Phone number: _____

Please give two additional references familiar with your experience with horses:

1. Name: _____

Address: _____

City, State, ZIP: _____

Phone number: _____

2. Name: _____

Address: _____

City, State, ZIP: _____

Phone number: _____

***** For Office Use Only *****

Application Received by (initial):		On (date)
Adopter contacted on (date):		About (horse name):
Visit date:	Results?	
Adopter contacted on (date):		About (horse name):
Visit date:	Results?	

****NOTES****