

HABITAT FOR HORSES
P. O. Box 213
Hitchcock, TX 77563
www.HabitatforHorses.org
866-HFH-LSER

Mailing Address: LONE STAR EQUINE RESCUE
P.O. Box 627
Haslet, TX 76052
www.LSER.org
866-434-5737

EQUINE DONATION CONTRACT

Donor Information:

Name: _____

Aliases: _____

Mailing Address: _____

City, State, Zip _____

Home phone: (____) _____ - _____ Alternate/Business phone: (____) _____ - _____

Email address: _____

May we allow potential adopters of the equine you are donating contact you? _____

Veterinarian Information:

Veterinarian's Name: _____

Business Name: _____

Mailing Address: _____

City, State, Zip _____

Business phone: (____) _____ - _____ Business Fax: (____) _____ - _____

Email address: _____

Equine Information:

Name: _____

Breed: _____ Age: _____ Color: _____

Sex: _____ Height: _____ Weight: _____ Markings: _____

Reason for donating this equine? _____

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Registration and Branding Information

Is equine registered? _____ Registry name? _____

Registration number? _____ Will you be turning over the registration papers? _____

Name of Dam (if known): _____

Name of Sire (if known): _____

Is the equine micro-chipped? _____ Whose name is the microchip information in? _____

Is the equine branded? _____ Where and what is the brand? _____

Does the equine have a lip tattoo? _____ Tattoo number: _____

Equine Riding Abilities and Training:

Can this equine be ridden? (check all that apply) Not rideable due to lameness or injury

Not rideable due to young age or lack of training Not rideable due to age

Children at walk Adults at walk light/medium riding only

If rideable, equine requires what type of rider? Beginner Intermediate Experienced

Equine requires what type of handler on the ground? Beginner Intermediate Experienced

Has this equine been trained or had experience in: (check all that apply)

Trail Competitive Trail Endurance English Pleasure Western Pleasure

Driving Eventing Jumping (how high?) Dressage Youth Horse Reining

Barrel Racing General Western Riding General English

Other: _____

Is this equine currently suitable for or have the potential for: (check all that apply)

Trail Competitive Trail Endurance English Pleasure Western Pleasure

Driving Eventing Jumping (how high?) Dressage Youth Horse Reining

Barrel Racing General Western Riding General English

Other: _____

Size and type of bit used: _____ Type of saddle used: _____

Describe any competitive experience this equine has: _____

Equine Behavior

Please rate this equine (1 = Mean/Afraid to 10 = Extremely Friendly):

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Friendliness towards adults: _____ Friendliness towards children: _____

Friendliness towards other equines: _____ Friendliness towards small animals: _____

Overall Temperament (1 = Very Quiet to 10 = Highly Spirited): _____

Has this equine (check all that apply): Bucked? Reared? Kicked? Bitten? Set Back?

Please explain _____

Is this equine easy to (check all that apply): Lead Tie Trailer Clip

Does the equine get along well with other equines? _____

If not, what type of situation does this equine prefer? _____

Equine Health

Does equine have any current or previous lameness problems? _____ Describe: _____

Does equine have any current or previous health problems? _____ Describe: _____

Is equine on any current medications? _____ Describe: _____

Does the equine have any special needs? _____ Describe: _____

General Information

Date of last trim: _____ Date last shod (if applicable): _____

Date of last worming: _____ Type of wormer used: _____

Date of last vaccinations: _____ Type of vaccinations: _____

Date of Coggins: _____ Date equine's teeth were floated: _____

In what kind of housing situation is the equine used to (pasture, stall, etc.)? _____

What type of feed and how much is the equine currently being fed? _____

Is there anything else you can tell us about the equine that will enable us to help find him/her the best

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possible home? _____

By signing this contract, I, the undersigned donor of the above described equine understand and agree to the following:

- I am giving up all my rights, title, and interest in the above described equine to Habitat for Horses, Inc. d/b/a Lone Star Equine Rescue (hereinafter known as 'the Organization').
- There are no liens or claims against the equine, and if any liens or claims are found, I will be solely responsible for them and will indemnify the Organization from all damages the Organization may suffer due to the initiation of legal proceedings brought against myself and/or the Organization arising from my former ownership of the above described equine.
- I am releasing this equine completely and voluntarily.
- I have read and fully understand the policies of the Organization and realize that in the event the existing policies do not cover a specific situation, the Organization will use its best judgment and ability in handling the situation in the best interest of the equine.
- I understand that once I release the equine, I will not be able to visit the equine or have control over the equine's care. I understand that the Organization will provide for the equine per their policies and in the event the existing policies do not cover a specific situation, the Organization will use its best judgment and ability in handling the situation in the best interest of the equine.
- I understand that the Organization will not accept the equine until I have signed and returned this contract, made a \$300 donation to the Organization, and have provided the Organization with a copy of the equine's veterinary records from the previous 12 months.
- I understand that the Organization will not accept this equine without a Negative Coggins test from within the last 12 months.
- I understand that the Organization may decline to accept the donation of this equine at any time until the equine has been moved into an approved Organization foster home.

This Contract is the complete and entire agreement between the parties and completely merges and supercedes all prior and contemporaneous oral or written discussions, negotiations, and agreements. No additions or modifications to or deletions from this Contract shall be effective unless executed in writing by the parties, and attached to this Contract as an Addendum. Please note yes or no in the space provided whether an addendum is attached. _____ (Any addendum is only valid if both the donor and the Organization sign and agree to the addendum).

By signing, I declare that the above information on the equine is true to the best of my knowledge.

Signature of Donor/s

Date

Printed Name of Donor/s

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Signature of Organization Officer or Director

Date

Printed Name of Organization Officer or Director

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