

Caisson Horse Adoption Application

Date: _____

Name of horse 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 horse are you interested in? _____ Mare: _____ Gelding: _____

Age? _____ Breed Preference? _____ Range of training: _____

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? _____

EQUESTRIAN FACILITIES

Complete address where horse will be housed:

Address: _____

City: _____ State: _____ Zip: _____

Property owner's name : _____

Phone: _____

Housing Location and Photographs:

Attach a detailed description and photos of the following locations which the horse will have access to. Be sure to note in the description what access the horse will have to the facilities (i.e. horse will be housed primarily in stall during adverse weather, etc.)

Barns

Stalls

Turnout lots

Run-in shelter

Fencing used to contain horse

Food and Water storage

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? _____

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 United States Army Caisson Platoon _____

Would you object to a follow-up visit by a Caisson Platoon staff member? Yes: _____ No: _____

Indicate any other farm animals you currently own.

Donkey: _____ Pig: _____ Ducks: _____ Geese: _____ Chickens: _____ Horse: _____

Peacock/hen: _____ Other: _____

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

Name: _____

Relation: _____ Phone: _____

Name: _____

Relation: _____ Phone _____

Terms of Adoption

(Initial all spaces)

I understand that this is an adoption and not a sale. _____

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 will provide a box stall for stabling this animal. A run in shed may be accepted with w/ TOG Adoption Committee approval. _____

I understand that should I no longer be able to keep the animal that I am required to notify the caisson platoon. _____

I understand that the caisson platoon is not able to give any guarantees on the health, training, or temperament of this animal _____

Unanswered questions, incomplete answers, and/or false information may result in this animal's Adoption Application being denied. The 3d Us Infantry Regiment, Adoption Committee 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 United States Army:

The United States Army is not liable for any illness, injury, or death of animals on Adopter's property caused by a caisson adopted animal.

The United States Army is not liable for any damage done to Adopter's property by an adopted animal at any time beyond the signing of this contract.

The United States Army is not liable for any personal injury to Adopter, Adopter's family, or anyone that is on the Adopter's property.

The United States Army 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

UNITED STATES ARMY USE ONLY:

Board Member Voting:

Board President	Yes	No
Board Member 2	Yes	No
Board Member 3	Yes	No
Board Member 4	Yes	No
Board Member 5	Yes	No

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) **Board President Approval / Disapproved**
- Reason for Denial:** _____