



HORSELINK

Application for Horse Donation

Introduction

We appreciate your decision to pursue the donation process of your horse to HorseLink. Should your application be accepted, HorseLink, as a nonprofit organization, will become the title owner of your horse at the conclusion of a successful trial phase. We feel we must emphasize in advance that due to the nature of the horse work we do at HorseLink, severely ill, injured, or dangerous horses cannot be accepted at this time. In addition, we preferentially select for gentle horses, as we know they are best suited for the work we do.

Horses accepted to HorseLink must be ready for work with humans in a number of capacities, none of which will involve riding. Therefore, we seek horses that are of sound mind and in good physical condition. The work may be different than the work they are used to and will consist of groundwork in a round pen or small enclosed area. The activities will take place in a variety of novel human-to-horse interactions. We will provide continued purpose for your horse and the others at HorseLink to help us help humans recover from challenging life situations like trauma, or to understand individual corporate responsibilities during leadership and team building activities, or to use their services with special populations like cancer patients and veterans transitioning back to civilian life.

HorseLink Farm details:

- Horses will live outside in pastures with plenty of grass for grazing and shelters for times of inclement weather.
- There is a 10 stall barn for medical lay-ups or other times of necessity.
- Live-in caretakers will be responsible for the daily care and feeding of the horses.

Evaluation period

Once the application is successful and a preliminary selection is made of your horse, we require a trial evaluation period of 45 days before HorseLink will formally accept the donation. We will work with your horse during this period to determine whether he or she will fit into the work of HorseLink. This period allows your horse time to understand his or her new surroundings. If we do not find 45 days to be enough time to evaluate your horse, we may extend this an additional 15 days.

During this time we will seek to evaluate the condition of your horse, review medical records relating to your horse, and assess the likelihood of success for your horse in our programs. We will require that you supply to us the previous year's veterinary records (including vaccinations, teeth floating, and any other visits from the vet). To begin the preliminary donation and trial period, we require that you transport your horse to the Farm. A \$500 deposit is required at the beginning of the evaluation phase when your horse arrives. If at any time during the evaluation period HorseLink your horse is deemed unusable for HorseLink's purposes, you will be required to pick up and take back your horse within 14 days. During the evaluation, you will also pay all medical costs related to your horse's health and fitness.



HORSELINK
(512) 360-8499

www.thehorselink.org

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Traits critical for your horse's success during the trial period

- Have no severe chronic conditions requiring extensive medical treatment
- Current on vaccinations, have proof of negative coggins
- Be of acceptable temperament for interactions with inexperienced handlers
- Sound at the walk and able to move comfortably around the farm
- Possess no dangerous habits such as kicking or biting
- Enjoy being in a herd and like people
- Must pass all evaluations and subsequent tests of suitability set forth in this application and during the adoption phase



Application Form:

Contact Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone (primary and secondary): _____ / _____

Horse Information

Please indicate your reason for choosing to or needing to retire your horse at this time:

How long have you owned this horse? _____

Do you own your horse free and clear of any encumbrances? _____

Name of horse to be donated

Registered or show name: _____

(If registered, with what registry, and which registration number?) _____

Barn name or nickname: _____

Age: _____ Breed: _____ Gender: _____

Color: _____ Markings: _____ Approx. Weight: _____

Does your horse have any of the following? Check all that apply.

Significant health issues

Allergies

Vices

If you marked any of the above, please explain:



What type of housing situation is your horse used to? (Pasture, stall, other)

Please check which discipline(s) your horse has competed in: (check all that apply)

- Barrel Racing
- Dressage
- Driving
- English Pleasure
- Eventing
- Hunter/Jumper
- Racing
- Reining
- Trail Competitive
- Trail Endurance
- Western Pleasure
- Youth Horse
- Other: _____

How many years has your horse actively competed in any discipline? _____

Is your horse easy to: (check all that apply)

- Catch/halter
- Lead
- Tie
- Groom/Clip
- Clean Feet
- Deworm
- Load/Unload/Trailer

Describe any current or previous lameness: (Please attach additional pages if needed):

Describe any current or previous health problems: (Please attach additional pages if needed):

Does your horse have any special needs? (Please attach additional pages if needed):



Does your horse wear shoes? Y or N If yes, is there any reason why your horse could not go without shoes that you are aware of? _____

What and how much is your horse currently being fed? _____

Does your horse receive supplements? _____ If so, what and why?

Your personal assessment of your horse's demeanor

Temperament (1-10, 1 = Very Quiet, 10 = Highly Spirited): ____

Friendliness towards adults (1-10, 1=Nasty /Afraid, 10=Extremely friendly): ____

Friendliness towards children (1-10, 1=Nasty/Afraid, 10=Extremely friendly): ____

Friendliness towards horses (1-10, 1=Nasty or Afraid, 10=Extremely friendly): ____

Friendliness towards dogs (1-10, 1 = Nasty or Afraid, 10 = Extremely friendly): ____

How often is your horse currently being ridden, if at all? _____

Name of your veterinarian and phone number:

_____ Phone: (____) _____

Do you agree to give Horse Link permission to speak to your horse's vet? _____

Conclusion of this application

Thank you very much for your attention to these important questions. We look forward to working with you on this process and thank you for thinking of HorseLink as a welcoming option for your horse to spend its new work days. We appreciate how difficult and worrisome it can be to decide when and where to retire your horse, and we hope to help you and your horse through this transition.

Sincerely,

HorseLink



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Consent Document

As the applicant and possible donor of the horse described in this application (referred to as “my horse” hereafter), I understand that this is only an application and implies no guarantee of approval to donate. I know that Horse Link reserves the right to deny any application or any donation for any reason whatsoever. If at any time during the evaluation period HorseLink your horse is deemed unusable for HorseLink’s purposes, I understand I will be required to pick up and take back your horse within 14 days of notification. I also understand and agree that if my application is accepted, we will move along in the process to the donation phase. That phase may result in the following:

- I will give up all my rights, title, and interest in the horse described;
- I will release my horse completely and voluntarily;
- I will not have control over my horse’s care, medical treatment, or boarding;
- I will accept all decisions Horse Link makes with respect to my horse;
- I will commit to a yearly donation to help Horse Link Farm continue its work.

I swear to the best of my ability that there are no liens or claims against the horse identified in this application and if any liens or claims are found, I will be solely responsible and will indemnify Horse Link from any and all liability and damages Horse Link may suffer due to legal proceedings brought against me and/or Horse Link arising from my former ownership of my horse, including any dispute of ownership, fees associate with prior room and board, medical expenses, and the like.

I understand that any tax implications of this application and possible donation will require my independent evaluation and I will consult with my experts and advisors to determine the value and deductibility of any donation.

I declare that all the information I provided on my horse is true and accurate to the best of my knowledge.

_____ Dated:
Application Signature

_____ Dated:
Horse Link

