

Big Oaks Rescue Farm Animal Adoption Application Form

Contact Information

Full name: _____

Occupation: _____

Address: _____

Daytime Phone: _____

Evening Phone: _____

Best time to call: _____

Email address: _____

Where will you keep the animal/s?

The animals must have shelter with a roof and at least two sides for windbreak. Please describe the shelter where the animal/s will be kept. Please include photo (may be submitted in electronic format):

Please include pictures of the area where animals are fed and given hay.(may be submitted in electronic format):

The animal/s MUST have adequate space. Please describe the fencing where the animal/s will be kept and include photos (may be in electronic format).

If you rent, please give the rules governing animals and the landlord's name and number:

(by providing this information you are allowing Big Oaks Animal Hospital to contact your landlord please inform them of this call so they will speak with us)

Do you have time to provide adequate care and attention? Y / N

Have you ever been arrested / charged with any kind of animal abuse, neglect or mistreatment? Y / N

Other Pets/Animals

What other animals/pets do you have (specify type and number)? Please include pictures of any large animals: (may be in electronic format).

Are these animals up to date on vaccines? _____

Are your pets spayed/neutered? Y / N (We do not expect mares to be neutered).

Do you have any stallions? Y / N If so, please describe:

Have you ever surrendered a pet/animal? ____ If so, please explain:

How do you discipline your equines and why?

Veterinarian - Who is Your Regular Veterinarian?

Veterinarian's name: _____

Clinic Name: _____

Clinic Address: _____

Clinic Phone: _____

(By providing Big Oaks Rescue Farm with this information you are allowing Big Oaks Rescue Farm to call your vet. Please call your vet and ask them to authorize the release of information to Big Oaks Rescue Farm.)

Signature _____ **Date** _____

Witness: _____