



*Blue Pearl Project*

*Horse Rescue*

*Save The Horses*

## Horse Adoption Application

Thank you for your interest in adopting a horse from Blue Pearl Project Horse Rescue. Our goal is to find the best possible home for our animals. To help us in meeting that goal, please answer the following questions to the best of your ability. Your accurate responses will also help us to match you with a horse who meets your requirements.

Contact Information:

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Email: \_\_\_\_\_

Do you own or rent your home:  Yes  No

If you rent, please tell us your landlord's name and phone number:

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Are you zoned for farm animals where you live?  Yes  No

Please tell us why you would like to adopt a horse from Blue Pearl Project Horse Rescue or Oak Meadows Ranch:

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Our goal is to adopt our horses to people who are committed to lifetime care for the horses they adopt. The only way we can continue to help more horses is if we are able to place our horses into these types of homes.



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We also understand that sometimes things happen that can disrupt the best of plans and/or intentions. So while we will be asking you to agree to return the horse to the sanctuary if circumstances occur where it becomes impossible for you to keep the horse, we also ask that you consider this next question very carefully:

If the horse you adopt is rideable, do you agree to provide care for the horse for the rest of his/her life, even after he/she can no longer be ridden?  Yes  No

If you are approved for adoption, will this be your first horse?  Yes  No

Are you willing to have a Blue Pearl Project Horse Rescue Committee representative do a property and facility check?  Yes  No

If you adopt a horse from Blue Pearl Project Horse Rescue, what would be your expectations of the horse be?: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

How would you describe your level of experience with horses?

Novice  Beginner  Intermediate  Experienced  Professional

Briefly explain what style or type of training techniques you prefer: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Briefly explain your experience with horses: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Do you currently have a horse (s)?  Yes  No

Explain what style of training techniques your prefer: \_\_\_\_\_

\_\_\_\_\_



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If you have had horses in the past, please tell us what they were used for and why you do not have them now: \_\_\_\_\_

\_\_\_\_\_

How often do you feel a horse should be wormed? \_\_\_\_\_

How often do you feel a horse's teeth need to be floated? \_\_\_\_\_

How often do you feel a horse's hooves should be done? \_\_\_\_\_

What is your opinion on shoeing a horse? \_\_\_\_\_

Do you have a specific breed or preference or type? \_\_\_\_\_

If yes, what is it? \_\_\_\_\_ Preferred age range: \_\_\_\_\_

If you are interested in adopting a pasture pal, what other animals would the horse be living with? \_\_\_\_\_

\_\_\_\_\_

How much do you anticipate spending yearly for feed, veterinary and farrier care, medicines, special dietary needs and board? \_\_\_\_\_

Tell us what types of vaccinations a horse should receive in your area and how often: \_\_\_\_\_

\_\_\_\_\_

Tell us who will be responsible for the horse's: \_\_\_\_\_

Feeding: \_\_\_\_\_

Age: \_\_\_\_\_ Experience level: \_\_\_\_\_

Training: \_\_\_\_\_

Age: \_\_\_\_\_ Experience level: \_\_\_\_\_

General care: \_\_\_\_\_

Age: \_\_\_\_\_ Experience level: \_\_\_\_\_



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Administering medications: \_\_\_\_\_

Age: \_\_\_\_\_ Experience level: \_\_\_\_\_

Will the horse live on your property?  Yes  No

If yes, what type of fencing does the facility have? \_\_\_\_\_

*(Barbed wire fencing may be problematic, so we'll need to discuss possible solutions)*

If no, please list the name, address and phone number of your boarding facility:

\_\_\_\_\_  
\_\_\_\_\_

If the horse is to be boarded, how often and for how long will the horse be turned out? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What type of fencing does the facility have? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

How big is the turnout area or pasture that the horse will have access to? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

If you are interested in riding a horse, what would you like to use the horse for (e.g., trail riding, dressage)? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

How hard and how long would you like to be able to work the horse? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What are the approximate age, height and weight of the person (s) who will be riding the horse?

Rider 1. Name: \_\_\_\_\_ Age: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Rider 2. Name: \_\_\_\_\_ Age: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Rider 3. Name: \_\_\_\_\_ Age: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_



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Rider 4. Name: \_\_\_\_\_ Age: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Please provide us with your veterinarian's information:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Please provide us with your farrier's information:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Please provide two references, people not related to you, who can testify to your ability to provide and care for a horse:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Please return this form Oak Meadows Ranch in Wildomar or mail it to:

**Blue Pearl Project a Non Profit Organization**

**951-805-7419**

**36068 Hidden Springs Rd. Suite C-142**

**Wildomar, California 92595**

WHEN YOU RETURN THE APPLICATION, PLEASE INCLUDE PHOTOS OR A VIDEO OF WHERE THE HORSE WILL BE LIVING.