



ADOPTION AGREEMENT

This Agreement is entered into on this ___ day ___, 20___, by and between **Rainbow Meadows Equine Rescue and Retirement, Inc.**, (hereinafter referred to as “**Rescue**”) and _____ (hereinafter referred to as “**Adopter(s)**”).

This Agreement is made in reference to the following horse:

Details known about the above referenced horse:

Date of Birth: _____ **Gender:** _____ **Color:** _____

Identifying marks: _____

Registration information (if applicable): _____

Health related information known about above referenced horse:

Eyes/Vision: No issues noted

Teeth: No issues noted

Feet/Legs: No issues noted

Back: No issues noted

Ears/Hearing: No issues noted

Skin/Hair Coat: No issues noted

Other health related issues: _____

Current feeding program:

Rainbow Meadows does not provide any supplemental nutritional product to its residents unless they are a “special needs” horse. Horses are maintained on 24 x 7 prairie pasture or prairie hay. Equine obesity is the leading cause of a number of equine health concerns and should be avoided at all cost through reasonable nutritional management. Whole grains are never appropriate for horses and other supplemental nutritional products are not needed for horses in good flesh that can maintain condition on forage alone and should be avoided. A vitamin and mineral supplement, such as Gro Strong by ADM Alliance, is a good way to provide a balanced intake.

Current hoof care program: _____

Rainbow Meadows is committed to the natural care of the equine hoof. This horse has been transitioned from any previous hoof care program to the Natural Barefoot Trim. We recommend that the horse remain barefoot at all times, unless booted or shod for special events with the boots and shoes removed as soon as possible to allow the hoof to move and expand as it should.

Behavior or personality information known about above referenced horse:

Adopter(s) to initial to indicate that you have read and understand each of the following items:

_____ **Adopter(s) understands that this is a binding NO BREEDING contract.** If you are adopting a mare, she is not allowed to reproduce under any circumstances, even accidental exposure to a stallion. If it is determined that breeding has occurred, the rescue may request relinquishment of the mare and any foal resulting from said breeding.

_____ Adopter(s) understand that there are no guarantees regarding the health, mental status, rideability, or management of the above listed horse. It is understood that the horse was rescued from a situation where there was neglect, abuse or abandonment. As a result the horse may or may not have any enduring behavioral or health-related conditions that may render it difficult to manage, handle or ride. The adopter understands these circumstances and accepts all limitations related to the above listed horse.

_____ Adopter(s) is willing to assume all financial, medical and legal responsibility for the above listed horse. It is understood that this adoption does not imply ownership or the right to lease, rent, sell, trade or otherwise move the horse from the inspected and approved adoption location of _____ without express permission from the Rescue.

_____ Adopter(s) assumes full responsibility for the health and welfare of the above listed horse. **All routine well-care related to vaccinations (at minimum EWT-West Nile; Rabies), deworming (at minimum 4 times per year), farrier care (no less than 5 times per year), dental float (no less than annually) will be completed in accordance with the guidelines provided by the American Association of Equine Practitioners. Records related to such care will be retained in the permanent adoption file provided by Rainbow Meadows, and provided to the rescue per the schedule listed on the Adoption/Foster Follow-up Contact Record.** Any significant illnesses, lameness, syndrome or other medical concerns will be addressed with a professional veterinarian immediately. Financial responsibility for all medical or well-care related concerns remains with the adopter. Death of the horse will be reported immediately. **Monthly reports are required for 6 months after adoption and an ANNUAL REPORT FORM will be completed and filed with the rescue upon each anniversary of adoption.**

_____ Adopter(s) further understands that the above referenced horse may not be sold, traded, leased or given away at any time. The horse may be returned to the Rescue, at the discretion of the Rescue regarding date of return, via a Forfeiture Process if the horse has not suffered a significant change in health status.

_____ Adopter(s) understand the following FORFEITURE PROCESS related to returning an adopted horse to the Rescue and that the date of return of the horse is dependent upon the current census of horses at the ranch:

- 1- A horse may be returned to the rescue within the first six months of adoption, assuming the horse is up to date on ALL WELLNESS CARE (negative Coggin's, dental float, vaccination for EWT-WN and Rabies within 6 months of forfeiture and dewormed 14 days prior to transport to the rescue with Quest Plus) and the horse has suffered no injury or illness compromising the horse's quality of life and ability to be rehomed. If the horse meets the above criteria and is returned within six months of adoption, there is NO FEE associated with its return.
- 2- A horse may be returned to the rescue AFTER the initial six months of adoption assuming the horse is up to date on ALL WELLNESS CARE (negative Coggin's, dental float, vaccination for EWT-WN and Rabies within 6 months of forfeiture and dewormed 14 days prior to transport to the rescue with Quest Plus) and the horse has suffered no injury or illness compromising the horse's quality of life and ability to be rehomed. If the horse meets the above criteria and is returned after six months of adoption, a Return Fee will apply.
- 3- If it is determined that the horse has been well cared for and can be adopted quickly a Return Fee of NO LESS THAN \$500.00 will be assessed to provide financial support for the horse for 60 days as a new home is located.
- 4- If a horse is determined to need remedial training or has reached an advanced age or has a health related issue and it is determined that the horse will remain at the rescue for an undetermined amount of time a Return Fee of \$1000.00 will be assessed.
- 5- The adopter must request permission to return the adopted animal. When all wellness criteria are met a Forfeiture Document will be issued which must be completed and notarized.
- 6- Once the Forfeiture Document is completed a return date is scheduled with the Rescue dependent upon the current census of horses at the ranch.
- 7- The Adoption File, provided at the time of adoption, must be up to date on all reporting including injury, illness and wellness care. That Adoption File must be returned, along with the notarized Forfeiture Document, with the horse.
- 8- It is the responsibility of the adopter to provide safe transportation of the adopted horse to the Rescue.

_____ Adopter(s) understands that the above listed horse and the adoption location may be inspected by a representative of the Rescue upon no less than 2 days (48 hours) notice by phone, email, letter or other personal contact at the discretion of the Rescue.

_____ Adopter(s) understands that the above listed horse may be confiscated by the Rescue at any time that the Rescue determines the welfare of the horse is in question. Should any assistance be required from law enforcement or an attorney, the Adopter(s) will assume any and all costs of said action.

_____ Adopter(s) agree that the above listed horse is to receive the utmost in reasonable and customary feed, nutrition, general well-care, and attention. If Adopter(s) can no longer provide such, Adopter(s) agrees to notify the Rescue immediately for return of the animal per the FORFEITURE PROCESS.

_____ Adopter(s) agrees that should the above listed horse have to be returned to the Rescue, Adopter(s) will remain financially responsible for any illness, disease, syndrome, lameness or other medical concern which developed during their adoptive period, at the discretion of the Rescue.

_____ Adopter agrees that a donation of \$_____ has been made at the same time as this adoption and is a statement of support for the work of Rainbow Meadows Equine Rescue and Retirement, Inc. and is not to be construed as payment for the afore-described horse.

A signature below indicates acceptance and understanding of this Agreement in total and that any questions or concerns have been addressed prior to signing.

Adopter(s):

I accept the terms and conditions of the Agreement.

_____	_____	_____
Print Name	Signature	Date

_____	_____	_____
Print Name	Signature	Date

_____	_____	_____
Print Name	Signature	Date

Adoption approved by Rescue:

_____	_____	_____
Signature	Position Title	Date