

Natural Horse Savvy
Equine Adoption Agreement

This agreement made this _____ day of _____, 20__ by and between _____
_____ (hereinafter called "Adoption Caregiver"), and Monica Meyette-Stephens of Natural
Horse Savvy (hereinafter called "NHS").

Equine's Name: _____ Breed: _____ Gender: _____ Age: _____
Registration #: _____ Rescue Description: _____
Description (color, markings, tattoos, scars.): _____

Please initial after each paragraph acknowledging the understanding and acceptance of the paragraph.

1. The Adoption Caregiver hereby accepts from the custody of NHS a certain animal(s) described above and Adoption Caregiver agrees to humanely take care of said animal; providing shelter from the elements (rain, snow, sun, etc..) and keeping fresh water accessible at all times (at will- free will basis) to said animal along with a sufficient amount of wholesome food (grain or pellet feed) to be fed at least every twelve (12) hours. This food (grain or pellet feed) does not include pasture grazing or hay which should be accessible at all times (at will- free will basis). _____

1.a The Adoption Caregiver agrees to adopt above described horse accepting all liability and without warrants from NHS, for the **adoption fee of \$**_____ Upon receipt of the adoption fee any registration papers for said horse will be transferred. _____

2. The Adoption Caregiver agrees to allow an officer of NHS to inspect the premises where the animal(s) will be or are currently being kept at any time to ascertain that the animal is well cared for and has the appropriate containment area(s) for said animal(s). Under normal circumstances, NHS will give prior notification of its intent to inspect, but reserves the right to make unannounced visits as it deems necessary. _____

3. NHS does not pay for: feed or hay for adopted equine, supplements, or any care expenses. _____

4. Adoption Caregivers may now, under any circumstances, claim ownership of said equine upon signing this document and gaining legal custody of the horse/horses. This includes putting your own name in the 'name of owner' section of a Coggins test or any other documents or accepting a receipt in your name only, not showing NHS's name anywhere on the receipt. The Adoption Caregiver's name may appear on the receipt; however, NHS is legally binding ownership to adoption caregiver upon all signature completed on this form and appear as sole owner/legal custodian. _____

5. Adoption Caregivers will notify NHS in the event any change occurs in the address or telephone numbers listed below. _____

6. Adoption Caregivers will not breed or have bred any adopted equine. _____

7. No adopted equine may be raced or used for any commercial purpose. _____

8. Adoption Caregiver is agreeing to adopt above described horse AS IS. NHS makes no warrants, guarantees, or otherwise implied evaluations of the horses health, soundness, training, or full history. NHS cannot be held responsible if the above described horse fails to meet the adopters expectations. However the horse may be returned to NHS at any time should the Adoption caregiver decide the horse is unsuitable. No adoption fee or costs will be reimbursed on the return of said horse. _____

9. Return of horse: Should adoption caregiver for any reason need to sell/rehome or get rid of above described horse. NHS must be contacted first and be given **first right of refusal**. This adoption contract will be signed by NHS and any new potential owner if horse is to be sold/rehomed. _____

9.a In the event of a crises or any change in circumstances that affects the adoption caregivers ability to properly care for above described horse, the horse must be returned to NHS. No reimbursement for any costs or adoption fee will be given. _____

9.b In the event that the Adoption Caregiver returns, or needs to return adopted equine - the equine should be in similar or better physical, mental, and emotional health then when the Adoption Caregiver adopted said equine. _____

10. Failure by the Adoption Caregiver to care properly for said horse will result NHS claiming breach of contract, return of horse, and a criminal investigation. _____

11. No adopted equine may be taken to or sold at any auction. _____

Signature of Adoption Caregiver (s): _____ **Date:** _____

Signature of NHS: _____ **Date:** _____

Date adoption began, if different than above: _____

Address/Location of adopter facility: _____

City: _____ **County:** _____ **Directions if no physical address to facility:** _____

If the adopter fails to comply with any of the conditions or stipulations set here, NHS reserves the right to regain possession of the horse/ horses. The adopter agrees to permit a representative of NHS to visit the property location, horse/horses with no prior notice. The adopter also agrees to allow NHS to return a horse/horses to the program IF the well being of the horse/horses is determined by NHS or there representative with approval to be threatened. By signing below, I certify that I have read and accept the terms, conditions, and stipulations that pertain to the adoption and placement of horse/horses from NHS. I understand that these terms, conditions and stipulations apply to the horse/horses that will be listed on this form at the time of placement. A copy of this agreement will be sent to you after the complete process of the adoption has taken place.

Signed this _____ Day of _____ 20____

Applicants Name _____

Applicants Signature _____

NHS Signature _____

Witness Signature _____