

Safe Haven Equine Rescue

Keeping Horses At Home Application

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Are you or your spouse currently employed? YES NO

If yes, how long? _____ If no, reason for leaving? _____

Current or prior employer? _____

Employer Address: _____

City: _____ State: _____ Zip Code: _____

Employer Phone: _____

Employer Email: _____

Wage: _____ Hourly or Salary (Circle One)

of horses you own: _____

Address of where horses are homed: _____

City: _____ State: _____ Zip Code: _____

Describe facility where horse(s) are kept (shelter, fencing, pastures): _____

Veterinarian: _____

Phone #: _____

Date of last visit: _____

Do you legally own the horse(s) listed on this application? YES NO

Horse Name	Age	General Health Condition (Good, Fair, Poor)	S-Stallion G-Gelding M-Mare F-Filly C-Colt	How long have you owned?	Type of Assistance Needed: Hay, Feed, Vaccinations, Coggins, Dental, Gelding, Farrier, Wound or Injury Care

References -

Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Please state your short and long term care plane for each horse you have listed on this application: _____

(attach additional pages if needed) _____

Safe Haven Equine Rescue has the "Keeping Horses At Home" program as a way to help responsible horse owners to continue to provide proper care for their horses in times of financial difficulty. This program is a hand up instead of a hand out so that owners can maintain their horses and keep them at home.

By submitting this application you understand and authorize the verification of any information you have provided.

In order for this application to be complete and considered you must provide the following;

_____ Proof of ownership for each horse listed (ex. coggins, registration papers)

_____ Proof of unemployment or other financial hardship

_____ Proof of income for previous year

_____ Pictures of your horse (Face, body from the left, body from the right, rear, and a clear picture of any brands the horse may have)

Applications and other documentation should be mailed to:

Safe Haven Equine Rescue
Attn: Keeping Horses At Home
4994 FM 2088
Gilmer, Texas 75644

or emailed to

safehavenrescue@etex.net

with the subject line of : Keeping Horses At Home

If you have any questions please contact us at the email address above or at 903-762-1432

Your application will be reviewed by a committee. If you are approved, a Safe Haven representative will contact you. If selected all payments made for the care of the horse will be made payable to the service provider not the horse owner.

Signature of Horse Owner

Date

Signature of Co-Owner

Date