

# Ranch Adoption Survey

(Please print. Use the back of this page to provide additional information as needed.)

Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Name \_\_\_\_\_ Cell Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Boarding Address (if different than above) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-Mail Address \_\_\_\_\_ Preferred method of contact:  Email  Phone  Text

Is this your first farm type pet?  Yes  No Is this animal a gift?  Yes  No If yes, for whom? \_\_\_\_\_

## Please tell us about your current animals (include all)

Horse(s) How many mares? \_\_\_\_\_ How many stallions? \_\_\_\_\_ How many geldings? \_\_\_\_\_  None

Goat(s) How many nannies? \_\_\_\_\_ How many billies? \_\_\_\_\_ How many wethers? \_\_\_\_\_  None

Dog(s) How many? \_\_\_\_\_ Cat(s) How many? \_\_\_\_\_

Other: \_\_\_\_\_

## Describe your plans for the animal (check all that apply)

Equine:	Goat:	Fowl:	Pig:	Other:
<input type="checkbox"/> Riding	<input type="checkbox"/> Companion	<input type="checkbox"/> Egg production	<input type="checkbox"/> Companion	_____
<input type="checkbox"/> Driving	<input type="checkbox"/> Milk	<input type="checkbox"/> Bug Control	<input type="checkbox"/> Breeding	_____
<input type="checkbox"/> Companion	<input type="checkbox"/> Lawn Mower	<input type="checkbox"/> Hatching young	<input type="checkbox"/> Meat	_____
<input type="checkbox"/> Breeding	<input type="checkbox"/> Meat	<input type="checkbox"/> Meat	<input type="checkbox"/> Couch cuddling	_____

Please describe your experience level with the type of animal you are seeking to adopt: \_\_\_\_\_

Describe the shelter and pen/pasture that will be provided for the animal(s): \_\_\_\_\_

Describe the fencing (material and size) for the animal(s): \_\_\_\_\_

Do you have a veterinarian available to treat the animal you are considering adopting?  Yes  No  Unsure

If Yes: Name/Phone Number: \_\_\_\_\_

If you use a different veterinarian for your dogs/cats list their contact information: Name/Phone Number \_\_\_\_\_

If seeking an equine:

Do you have a farrier to provide hoof care?  Yes  No Are they certified?  Yes  No  Unsure

Farrier's Name/Phone Number: \_\_\_\_\_

Do you have a trainer to provide further training?  Yes  No Name/Phone Number: \_\_\_\_\_

Please tell us how you heard about us:

Longmeadow Website  Past Adoption  Family/Friend  MyRightHorse.org  Facebook  Other \_\_\_\_\_

Additional contributions to help provide for the care of the remaining homeless animals are appreciated.

\$10  \$25  \$50  \$100  Other \_\_\_\_\_

**I understand that after adoption all financial obligations for the care of this pet are my responsibility.**

**I am at least 18 years of age and can provide valid picture identification. I assume all risk associated with visiting the Longmeadow Rescue Ranch, including but not limited to, falls, contact with animals, including animal bites, kicks, and scratches, and contact with visitors. I realize the risk associated with participating in the visitation of animals and the adoption process. I hereby release the Longmeadow Rescue Ranch for all liability to myself, my family, and my property as a result of interaction with an animal including any interaction in any animal housing area and in a get acquainted area.**

**\*PLEASE NOTE: Adoption Hold Payments are NON Refundable. Hold payments may be transferred to a different animal during the 10 day hold timeframe only.\***

Signature \_\_\_\_\_ Last 4 SS# \_\_\_\_\_ or Last 4 D/L# \_\_\_\_\_