



Application for Horse Donation

Horse Name: _____ Sex: Mare Gelding Date: _____

Location of Horse: _____ Current Living Situation: _____

Owner: _____ Phone Number: _____

Breed: _____ Color: _____ Markings: _____

Age: _____ Height: _____ Weight: _____

HEALTH HISTORY

Current Vet: _____ Farrier: _____ Feed: _____

Vaccinations:

Type: _____ Date Given: _____

Type: _____ Date Given: _____

Type: _____ Date Given: _____

Deworming:

Type: _____ Date Given: _____

Type: _____ Date Given: _____

Type: _____ Date Given: _____

Feet: (please check) Barefoot/Trimmed Half-Set Full set

Vision: _____ Hearing: _____ Lameness Issues: _____

Last Ridden: (date/type) _____

Additional Notes:

TRAINING & EXPERIENCE

Horse schooled in Arena: _____ On Trails _____ Shows/Parades: _____

English: _____ Western: _____ Dressage: _____ Jump: _____

Walk: _____ Trot: _____ Canter: _____

Lunges: _____ Leads at walk: _____ Leads at trot: _____

What is the typical way of going:

Hard to get going: _____ Willing _____ Forward _____ Gate/Barn Sour: _____

TEMPERAMENT WHILE AT WORK

Has the horse ever: Kicked: _____ Bucked: _____ Reared: _____

Does the Horse Bite: _____ Spook: _____ Pull Back: _____ Bathe: _____ Crib: _____

HERD DYNAMIC- Aggressive: _____ Passive: _____ Quiet: _____

Gets along with other horses (mares & geldings): _____

Dislikes: _____

Reason for desire to donate horse: _____

TACK – Bit: _____ Martingale: _____ Ride in halter: _____ Bareback: _____

**Please Note: In order for your horse to be considered for trial, you must also provide at least the past three years of veterinary records. These records, along with this application, can be emailed to Program Director, Brenda Falco at bfalco@halleckcreekbranch.org. Additional records may be requested by HCR where deemed appropriate.*