



“TAKE HOME A CHAMPION”

Adoption Application

Personal Information:

First Name: (at least 21 years of age): _____

Last Name: _____

Age of Rider(s): _____

Rider(s) Height and Weight: _____

Contact Information:

Address: _____

City: _____

State: _____

Zip: _____

Home Phone: _____

Cell Phone: _____

Email: _____

Financial Information:

Where do you work? _____

What is your Occupation? _____

Do you work Full Time, Part Time, Self Employed or Other? _____

What is your household's total income? _____

Will there be anyone helping pay for the care of the horse? _____

How much do you estimate it will cost per year to own your adopted horse? Please explain. _____

Horse Experience and History:

What is your experience with horses? _____

Have you Owned a horse before? _____

Do you currently own a horse? If yes, how many and for how long? _____

You and Your Potential Adopted Horse:

Why do you want to adopt an ex-racehorse? _____

What qualities would you like to have in your horse? (i.e. age, color, sex, size, temperament) _____

What style and level of riding do you wish to achieve? _____

How often do you want to ride your horse? _____

Do you have a trainer? If yes, please give their contact information. _____

Will anyone else be riding the horse? _____

Are you interested in a specific horse? Please list the horse's name. _____

When would you like to adopt? _____

Contract Information:

have you read the "Adoption Contract" and agree to the terms and rules of governing adoptions from After The Races NY?

By signing or typing your full name below, you certify that all of the information that you have provided on this application is true and correct to the best of your knowledge:

Signature

Date Signed