



ADOPTION APPLICATION

Sophia's Oasis for Equines, Inc. (SOFE)

9145 Mackall Road, Saint Leonard, MD 20685

sofehorses@gmail.com

Waiver of Liability

By signing below, the buyer understands that SOPHIA'S OASIS FOR EQUINES, INC. (SOFE) makes no representations or warranties concerning any horse offered for adoption through the programs, including but not limited to the condition, health, temperament, soundness, or fitness for particular purpose. Buyer understands and agrees that SOFE, Inc, its officers, directors, representatives, volunteers, agents, servants, and assigns, are not liable for any representations or misrepresentations concerning any horse offered for adoption through this program; all information listed on SOFE's Facebook page and/or divisions thereof, regarding any particular horse is based solely on information provided by the previous owners or authorized caretakers.

I, _____ (adopter), do hereby release SOFE, its officers, directors, representatives, volunteers, agents, servants, and assigns (collectively "Releasees") of and from any liability arising from representations, misrepresentations, care and handling of the horses offered for sale either by SOFE or any divisions thereof. I further agree that Releasees are not liable for the mistakes and/or negligence and/or intentional acts of service providers and/or contractors such as livestock haulers, veterinarians, or handlers who may at any time be in the care, custody and control of the horse I am adopting. I understand that I may pursue claims against such third parties for any damages caused by mistakes, negligence and/or intentional acts of such third parties during the time that my horse is in their care, custody and control.

Agreement

Signing this application authorizes SOFE to contact the above listed references and inquire about your equine experience. You agree to send SOFE updates at 3 months, 6 months and 1 year after acquisition of the animal.

It is agreed that if said animal is offered for sale, in the future, that SOFE will be notified and given First Right of Refusal. SOFE has seven (7) days in which to exercise its First Right of Refusal from the date of notification by the owner. If SOFE opts not to exercise its First Right of Refusal, the owner shall provide SOFE with the name, address and telephone number of any prospective owner to which the horse may be transferred so that SOFE may update its records and monitor the whereabouts, health and safety of the horse. It is further agreed that any subsequent owner will complete the Application and Contract Agreement within one (1) week and the subsequent owner shall be bound by the terms thereof.

Finally, the undersigned agrees that this animal will only be transferred privately and will not be resold at any type of auction, horse broker, feed lot or slaughter destination and that the animal will be transferred under contract with this paragraph included in the contract.

In the event the undersigned fails to comply with the terms of this Application and Agreement, SOFE reserves the right to commence legal proceedings to recover the horse, and the undersigned shall be liable for all costs including damages to SOFE, inclusive of attorney's fees, in connection with such legal proceeding.

This offer is accepted by:

Signed _____ Date _____

*Buyer signature warrants that they buyer is at least 18 years of age at the time of signature and acknowledges receipt of the Processing Terms and Conditions contained within this agreement.

Office Use Only

Approved: _____ Date: _____



Sophia's Oasis for Equines, Inc. (SOFE)

9145 Mackall Road, Saint Leonard, MD 20685

Tel: (667) 486-0783

Equine Adoption and/or Foster Requirements

If you are interested in adopting one of our rescues, please request an application by phone or email at sofehorses@gmail.com.

ADOPTION: These are the basic guidelines for adoption:

We take applications on a case-by-case basis as we want to ensure a good match of equine and adopter. If in the future the Adopter must rehome this equine, the Adoption Contract stipulates that SOFE, Inc. has right of first refusal on the equine; and that the equine is **never** to be conveyed via dealer, auction, slaughter, etc. In the event of the death of the adopter, the estate is to (1) return the equine to SOFE or (2) If the estate knows of a suitable placement, the estate **must** contact SOFE to approve placement of the equine.

If we waive our right of first refusal, we require that the subsequent owner/buyer also contract with us, to ensure the equine's continued safety.

PLACEMENT APPLICATION INSTRUCTIONS:

- Failure to complete all questions completely will delay or deny your application. Please feel free to attach additional information about you and the kind of equine you are looking for to expedite your application.
- Please include a \$25 Processing Fee with your Placement Application. This fee is non-refundable.
- Once your application is approved, you must make arrangements to finalize the adoption by executing the Adoption Contract, paying his adoption fee, and arrange transport of your new equine within 7 days. Until this accomplished, the equine will still be available to other potential adopters.
- If possession of the equine is not arranged within the 7 day period, the adopter will be responsible for the continued care costs of the equine, which are \$300/month or \$12/day until he leaves our facility, plus any additional costs such as farrier and vet services if required.
- The Adoption Contract will be a "Conditional Adoption Contract for ownership" for a period of 6 months. SOFE, Inc. reserves the right and the adopter agrees to allow representatives of SOFE, Inc. on the property where the equine is kept to check on the

equines wellbeing. Ownership of the equine remains with SOFE, Inc for 6 months to ensure a safe and mutually satisfying placement for both the equine and the Adopter. After the initial 6 months a final transfer will be affected with the submission of an acceptable veterinary Report (we supply form). Additionally after the initial 6 months the adopters agree to allow representatives from SOFE, Inc. on the property where the equine is kept at least once a year for the first 5 years to check on the equine.

- Also, we request that all Adopters adhere to SOFE's "Standards of Care" in caring for their adopted equine. A copy of our standards of care is attached to this Application for your review and understanding and it is made part of the Adoption Contract.

FOSTERING:

SOFE fosters out equines in very specific circumstances. Specifically, we are looking to place companion-only types into long-term situations -- we refer to them as "forever fosters". Many of our rescues just need safe haven to enjoy the rest of their lives. Young, trainable and/or rideable equines come directly to our facility to allow us to work with them and have them available to show to prospective adoptive homes. (Jackie Curry Flynt, Pres. of SOFE)

However, at times, we do look for short-term quarantine ("QT") situations that are local to us and our vet so that we have access for emergent care. These one-on-one QT circumstances might be for us, or for colleagues who need to quarantine equines prior to trailering them longer distances to their ultimate destinations.

Occasionally we receive offers of fostering slaughter auction or feed lot equines so that we can pull equines to safety. Generally, we can't just 'pull and foster-out' these equines as SOFE can only take on responsibility, financially &/or otherwise, for so many equines at a time.

Ultimately, fostered equines are **STILL** our responsibility, and normally we've found that most foster-offerers are only able to assist in housing the equines short term, a month or so or less. Please keep in mind that the average time an equine stays in rescue before adoption is 6 months. Often it's much longer. When/if they start 'coming back' fosters contacting us to 'return' equines (ie: the weather starts to turn), it can overwhelm our ability to house and care for them. So sadly, we do have to limit the number of equines we can assist at any one time.

SOFE DOES have a Foster/Quarantine Application and Contract procedure, just as we do for Adoption --- to protect the equines. Sadly, there have been too many instances out there of Foster equines disappearing. . . If you are local to SOFE and would consider fostering a companion equine long-term or quarantining a equine short-term, please contact us via email.

STANDARDS OF CARE

The following Minimum Standards of Care will be required for equines housed at approved foster and adoptive homes:

Feeding

- Nutritious grain in sufficient quality and appropriate nutritive value unless equines are receiving adequate natural forage.
- Diet shall be prepared with consideration for the age, breed/type, condition, size, work level and quantity of equine(s).
- Equines shall have no less than a body condition score 4 and no more than 6 on the Henneke Condition Scoring Chart (BC) to be considered of adequate weight. Exceptions are made for arrivals on premises less than six months and showing continued documented improvement or for equines under the continued care of a veterinarian.
- All feed and hay storage and feeding receptacles shall be kept clean and free from contaminants, such as feces, mold, mildew, insects, etc.
- If more than one animal is fed at one time or in one place, it shall be the responsibility of the owner/custodian to ensure that each animal receives nutrition in sufficient quantity.
- Minimum hay requirements shall be observed with the quality of hay representative of choice grasses in the local area. Equines should receive a minimum of 2% of their body weight in high quality hay per day unless equines are receiving adequate natural forage. Exceptions may be made for equines who need less to maintain an acceptable Body Condition Score or for those who are on a diet for weight loss.

Necessary Veterinary Care ~

An annual vaccination schedule shall be maintained and conducted by a veterinarian. This includes a Spring Vaccination protocol to include Eastern and Western Encephalitis, Tetanus, West Nile, Potomac Equine Fever, rabies and tetanus and a Fall vaccination protocol to include a flu vaccine and if necessary Eastern/Western Encephalitis and Tetanus. It is expected that the adopter will seek immediate veterinary intervention in the event the equine shows any of the following signs:

- Shock
- Colic
- Founder
- Broken bone
- Deep tissue wound
- Inability or unwillingness to eat or drink

- Blistering or burns
- Irregular or abnormal breathing
- Partial or total paralysis
- Abnormal discharge
- Severe bleeding
- Continued symptoms of heavy intestinal parasite load despite adequate deworming
- Weight loss
- Abnormal skin condition
- Hair loss
- Temperature fluctuation
- Diarrhea
- Lameness

Standard Care

- Hoof care maintenance and trimming every six (6) to eight (8) weeks or as directed by a veterinarian or a farrier. Hoof care shall be done by an experienced person knowledgeable in standard farrier practice. Exceptions may be made for equines who are not yet tame enough to have their feet handled.
- Hooves should be cleaned out at least once/week. Exceptions may be made for equines who are not yet tame enough to have their feet handled.
- Parasites kept under control through either a daily deworming product or by deworming every eight (8) to twelve (12) weeks or as directed by a veterinarian.
- Annual veterinary procedures as outlined in the Standard Veterinary Procedures Policy shall be performed.

Dental care - Routine dental work (floating) shall be performed at least once/year by a qualified veterinarian or equine dentist. Floating may be recommended more often for certain equines by a qualified veterinarian or equine dentist.

Non-routine dental work shall be provided as needed in a reasonable amount of time.

Water - Proper water is clean, potable water that is available at all times for all equines. Exceptions shall be determined by veterinary consultation of professionally accepted practices for the safety and well-being of the equine.

Equines that are being worked or are in transport shall be provided water as often as necessary for the health and comfort of the equine. All water receptacles shall be kept clean and free of contaminants and be positioned or affixed to minimize spillage.

Space and Shelter for Each Equine - Each equine must be provided with space that is safe. The space for each equine must be free from standing water, accumulated waste, sharp objects, and debris.

Any fencing must be well maintained and in good repair at all times. Each equine should be provided with adequate exercise. Exceptions are granted when equines are under stall rest per a veterinary recommendation.

Stalled equines shall be exercised or turned out daily. Exceptions shall be made for times of bad weather, injured or ill equines, or equines who are not yet tame enough to be exercised or lead to turn out areas.

While not all pastures or turn out areas must have man-made shelter, man-made shelter consisting of a roof and a minimum of two sides must be available as needed for ill, injured, older, or underweight equines. The shelter shall be in good repair and free of standing water, accumulated waste, sharp objects, and debris. There should be adequate space for each equine that will be sharing the shelter at any given time.

Your signature below indicates that you agree to abide by the terms and conditions set forth and detailed above.

Print Name: _____

Signature: _____



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Equine Adoption and/or Foster Application

Applicant Information:

Please circle each option that applies: **I'm an Adoption Applicant** **I'm a Foster Applicant**

Name

Mailing Address

City, State, Zip Code

County

Home Phone Number

Work Phone Number

Mobile Phone Number

E-mail Address

All Applicants must be over the age of 18. Are you over the age of 18? Yes _____ No _____

Have you ever been charged with or convicted of animal abuse and/or neglect?

Yes _____ No _____

If Yes, please explain:

Equine Related Information:

Do you currently own any equine? Yes _____ No _____ If Yes, how many? _____

Please give us the date you last vaccinated your equine(s): _____ / _____ / _____

Types of vaccinations your equine(s) received:

Please give us the date you last dewormed your equine(s): _____ / _____ / _____

Which deworming product did you use?

Please give us the date you last had your equine(s) hooves trimmed: _____ / _____ / _____

Do you trim them yourself? Yes No

If No, please give your farrier's name and phone number:

If you do not own any equine(s), have you owned any in the past and if so how long did you own it for?

Within the last 5 years have you given away or sold any equine(s), if so please explain?

Within the last 5 years have any equine(s) died while in your care, if so please explain?

Describe your experience with horses, handling, caring for horses, foaling, riding, training, showing:

****Additional space is for your use in providing explanations to the questions above (in the Equine Related Information Section) of this application:**

Will the equine adopted/fostered be housed at the address stated on the first page?

Yes _____ No _____

If you selected No, please provide the following information:

Facility Name	
Facility Address	City, State, Zip
Contact Person	Facility Phone Number

Facility Information:

If your adopted/fostered equine will be kept in a barn, please answer the following questions:

Stall Size	How many hours will equine be turned out?
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If adopted/fostered equine will be pastured, at any time, please answer the following questions:

Pasture Size	Number of other equine that will kept in the same pasture
Describe the type and size of shelter in pasture.	Describe the type of fencing that is used for the pasture

Equine Care Information:

Who will be feeding the adopted/fostered equine?

Does this person have experience with equines?

How often do you plan on feeding the adopted/fostered equine?

How often do you plan on deworming the adopted/fostered equine?

What type of deworming products do you plan to use?

Please provide your farrier's name and phone number. How often do you plan on having a farrier trim and/or shoe the adopted/fostered equine?

How often do you plan on taking the adopted/fostered equine to visit a veterinarian?

Foster Care Information: *(For Foster Homes ONLY, if you only want to adopt, skip this section!)*

I would be able to foster: *(please circle ALL that apply)*

Average Horse

Pony

Miniature Horse

Average Donkey

Draft Horse

Draft Mule

Average Mule

Miniature Donkey

I would be able to foster an equine that fits into the following criteria: *(please check ALL that apply)*

_____ **An equine with health problems**

_____ **An equine with training issues**

_____ **An equine that is too young to ride** *(5 months to 2 years old)*

_____ **An equine that cannot be ridden for any reason**

_____ **An older equine** *(25+ years old)*

_____ **An equine that is in foal**

_____ **An equine that was seized by law enforcement, while waiting a hearing** *(The owner may be awarded custody of the animal by a judge)*

_____ **An equine with serious hoof conditions** *(Founder, Laminitis, Navicular, etc.)*

_____ **A stallion or a newly gelded equine**

**How many fostered equine could you house on a regular basis?
In an emergency?**

Adoption Information: *(For Adoption ONLY, if you only want to foster, skip this section!)*

Please list the names of the equine(s) that you are interested in adopting, in order of preference:

1. _____ 3. _____

2. _____ 4. _____

What are you planning on using your adopted equine for?

How much time, per week, will you spend working with the adopted equine?

If the adopted equine is able to be ridden, how often do you plan to ride the equine each week, and for how long do you plan on riding?

Please list each person's name, their age, height, weight and riding level (1=no experience to 10=very experienced) of every person that will be riding the adopted equine:

Reference Information

Veterinary Reference Name

Phone Number

Please check which applies:

Address

_____ This is my current vet. # Years used _____

City, State, Zip Code

_____ This is the vet I plan on using.

Personal Reference #1 Name

Phone Number

Address

City, State, Zip Code

Personal Reference #2 Name

Phone Number

Address

City, State, Zip Code

I understand that by filling out and signing this application, I am applying to adopt and/or foster an equine from Sophia's Oasis for Equines, Inc. (SOFE) I also understand that my application must be approved before be allowed to adopt/foster an equine from SOFE, Inc. I also understand that my application may be denied for any reason and I may not be able to adopt and/or foster an equine from SOFE, Inc.

I also agree and understand that the information provided in this application may be used to request background checks, including criminal records to verify personal information.

By signing this application, I am stating that all information provided is true and I understand that there may be consequences to providing faulty information.

Applicant's Name (Printed)

Date

Applicant's Signature (Application is VOID without signature)

Please note: A complete application includes this application, \$25.00 non- refundable application fee, 3 completed Personal Reference Forms/Letter, A Veterinary Reference Form/Letter, and photos of the facility where the horse will be kept. If any of these documents are missing our staff will not be able to complete the approval process! Please make sure you have all documentation when submitting your application. Thank you!

You may return this application to our main organization:

Sophia's Oasis for Equines, Inc.

9145 Mackall Road

Saint Leonard, MD 20685

Tel: (667) 486-0783

Additional Space for Information is needed:



Sophia's Oasis for Equines, Inc (SOFE) Veterinary Reference Form

The veterinarian who fills out this form will not be held liable for opinions expressed within this form. If you currently do not have a veterinarian, you may ask a veterinarian who will be working on your horse(s) to fill out the form stating that he or she is willing to work on your horse(s). The purpose of this form is so that Sophia's Oasis for Equines (SOFE) will know that you have a veterinarian available whenever your adopted or fostered horse(s) need veterinary care. Your veterinarian reference may not be an immediate family member and it also may not be anyone who fills out any other reference form(s) for you.

To Be Completed By Applicant:

Name: _____
Address: _____
Phone Number: _____
Email Address: _____

To Be Completed By Veterinarian:

Name: _____
Clinic Name: _____
Clinic Address: _____
Phone Number: _____
How long have you been treating the applicant's horse(s)? _____

Does the applicant keep his or her horse(s) current on their vaccinations and other health care? _____

Date of last Coggins: _____

Date of last Rabies Vaccination: _____

If you have not previously worked with the applicant's horse(s), after speaking with the applicant, would you be willing to work with any horse(s) he or she may adopt for SOFE? Why or why not? _____

If applicable, describe your impression of the care and condition of the horse(s) the applicant currently owns. Do you think the applicant would make a good adoptive home for a horse from SOFE? Why or why not? _____

Thank you for taking the time to complete this form!

***Please return to:
9145 Mackall Road
St Leonard, MD 20685***

or email: Sofehorses@gmail.com