



EQUINE INFORMATION FORM

Owner's Name _____ Date _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Horse Information:

Name: _____ Breed: _____

Age: _____ Gender: _____ Color: _____ Height: _____

Discipline(s) trained for: _____

Is your horse/pony able to walk/trot/canter/jump? If not, please explain:

Is your horse being used regularly right now? Please explain. _____

Does your horse/pony have any ongoing lameness issues? _____

Does your horse/pony have any physical/psychological problems that call for routine treatment?

Continued on back

Does your horse/pony load and trailer well? _____

Why would you like to donate your horse/pony to **EQUI-KIDS**? _____

Do you have clear title to this animal? _____

Where is your horse/pony stabled? _____

Are you able to delay this donation or do you need to move your horse immediately? (Due to space and program restrictions at any given time, we may not be able to take on any additional equines right away) _____

If you are able to, please provide a photograph of your animal.

Mail completed form to:

EQUI-KIDS, Horse Donation, 2626 Heritage Park Drive, Virginia Beach, VA 23456

Thanks again for your support!

Please include any additional information you wish to provide in the space below.
