ADOPTION REQUIREMENTS & REGULATIONS
HORSES

By signing this Adoption Requirements & Regulations document, you acknowledge that failure to comply with any of the Adoption Requirements & Regulations will be considered a breach of the Adoption Contract, in which case the ARL will be entitled to repossess the horse.

Adoption Requirements

• The horse must be provided proper and nutritious amounts of food, fresh water, safe fencing, adequate shelter, and kind treatment at all times. Adopter agrees to ensure that if the horse is stabled, that all of the above are provided. The Adopter’s or stable’s feeding program must keep horse in good flesh, with no backbone or ribs showing.

• Neglected, abandoned or inhumanely treated horses will be immediately returned to the ARL. Transportation fees will be assessed. In this case, adoption fees are NON-REFUNDABLE.

• Adopter will not place the horse with an abusive trainer.

• Adopter agrees not to breed any horse adopted from the ARL.

• Adopter will not allow the horse to run at large and will provide adequate fencing.

• If the horse becomes sick or lame, Adopter agrees to provide prompt and adequate medical care and treatment.

• Adopter is responsible for all expenses incurred for the care of the horse. There are no reimbursements.

• Adopter certifies that he/she has no prior violations of adoption regulations or convictions of inhumane treatment to animals.

• If Adopter does not have experience with horses, Adopter will be asked to take at least one basic horsemanship class before adoption will be approved.

• ARL reserves the right to refuse adoption of any horse.

• The Animal Rescue League of Iowa, Inc. (ARL) retains ownership of the horse for a probationary period of at least 6 months from date of adoption. During this time, Adopter agrees to allow ARL to monitor the well-being of the horse and, if it is found the horse is not fed or cared for properly, the ARL will repossess the horse. The ARL will take legal action to recover all costs and attorneys fees if such an action is required.

• The Adopter agrees to pay the Adoption Fee to remove the horse from the ARL’s premises.

• Adopter cannot sell the horse.

• If Adopter cannot or does not wish to care for the horse, at any time it MUST be returned to the ARL.
Adopter cannot transfer ownership of the horse without the prior written consent of the ARL, and completion of transfer of ownership documentation.

Within thirty (30) days from adoption date, Adopter must notify the ARL in writing of the following events:

1. Within seven (7) days of acquiring possession of the horse, Adopter will notify the ARL as to the name and phone number of Adopter’s veterinarian.

2. Death of the horse. Notification is required immediately with a veterinarian’s statement/cause of death.

3. The horse suffers a major injury of medical problem. Notification is required immediately with the name and telephone number of the veterinarian who performed the diagnosis.

4. Movement of the horse from the location on record with ARL. Notification is required within 14 days if the horse is moved to a new location for more than 30 days.

5. Adopter moves or changes his/her phone number. Notification is required within 14 days so the ARL may conduct follow-ups on the horse.

In order to monitor the condition and well-being of the horse, Adopter therefore gives permission to the ARL to come onto the property where the horse is located with prior notification.

Adopter agrees to abide by all of the above conditions. If the ARL or its agent(s) find that any of the above conditions have been violated, the horse is subject to a breach of these adoption requirements and will be repossessed by the ARL.

Health Care

Adopters will receive a copy of a medical record of vaccinations and worming, and a feeding/medication/special care form.

Payment

Payment must be in the form of a money order, Master Card, Visa, or cashiers check. The total adoption fee is required at adoption. There are no refunds on adoption fees. The adoption fee on the horse is not tax deductible.

Adopter hereby certifies that Adopter has read, understands, and agrees to abide by the above conditions for the adoption of the ARL horse.

Adopter(s) ___________________________ Date ____________

Agent, ARL ___________________________ Date ____________
Return Policies

- If the adopter(s) discovers that the horse has a previously unknown health condition or lameness, or is unsuitable, the horse must be returned to the ARL

Return Procedures

- Call the ARL office (515) 262-9503 seven days a week between the hours of 9:30 a.m. and 6:00 p.m. to inform us that you would like to return the horse.

- Make arrangements with us to return the horse to the ARL premises at a specific date and time.

- Fill out all necessary paperwork.

Refund Policies

- Adoption fees are Non-Refundable

- If you cannot provide transportation for the horse, hauling charges are as follows:
  
  - $30.00 hook-up fee and $2.00 per mile.

PLEASE NOTE: The Animal Rescue League of Iowa, Inc. (“ARL”) will not exchange horses when you return a horse you have previously adopted from the ARL.

Print Name: ____________________________

Signature: ____________________________ Date: ____________________________
**ANIMAL RESCUE LEAGUE OF IOWA**  
5452 N.E. 22nd St.  
Des Moines, Iowa 50313

Medical Treatment Record

Name: ____________________________  
Description: ________________________  
Number: ____________________________  
Degree of soundness: ____________________

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<td>Shoe</td>
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Comments: __________________________________________________________

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________
Horse Leaving ARL – Feed and Medicines Sheet

Name of horse: ____________________________

Amount of hay: __________________________

Amount of grain: __________________________

Supplements given: ________________________

Medications: _____________________________

Other comments: _________________________
Date: __________________

Dear Stable Manager:

____________________ has adopted a horse (description below) from the Animal Rescue League of Iowa (ARL), and has indicated to us that this horse will be boarded at your facilities. As part of our adoption contract, the adopter has agreed to provide for all aspects of this horse’s well being (including shelter, feed, vet and farrier care, and the other expenses normally incurred by owning a horse). Should the adopter become negligent in any of these responsibilities, the ARL asks that you notify the ARL immediately so that we can take appropriate action to rectify the situation. We also ask that you notify us if the adopter removes the horse from your facilities, so that we can keep our records accurate.

Please sign this letter and return one copy to the ARL in the enclosed envelope so that you can: acknowledgement receipt of this letter, confirm that the specified horse is being, or will be, cared for at your facilities, and verify the address and contact information we have for your facilities.

Thank you in advance for your cooperation.

ANIMAL RESCUE LEAGUE OF IOWA, INC.

Horse Name: __________________ ARL Number: __________________

Description: __________________

Stable Name: __________________

Physical Address/City/State/Zip __________________

Contact name: __________________ Phone Number: __________________

Adopter __________________ Date __________________ Stable Representative __________________ Date __________________

ARL Representative __________________ Date __________________
ANIMAL RESCUE LEAGUE OF IOWA
5452 N.E. 22nd St.
Des Moines, Iowa 50313

Adopter has received from the Animal Rescue League of Iowa, Inc. (ARL) a copy of the following at time of adoption:

Adoption Contract
Adoption Regulations
Coggins Test Result
ARL Medical Treatment Record
Horse Leaving – Feed and Med. Sheet
Return Policies

Horse name: ________________________________ ARL Number ________________

Signature of Adopter ________________________________ Date ________________

ARL Representative ________________________________ Date ________________