

## A 501c3 nonprofit organization 25144 Xeon St. NW, Isanti, MN 55040 • 763-250-8283 Lucky7horserescue@gmail.com

## **Adoption Application**

Name of Adop	oter:				
Address:					
City, State, Zij	p:				
Home/Cell Pho	one:				
<b>Email Address</b>	s:				
Name of Horse	e:				
Color:	Y	ear Foale	d:		
Sex:	Gelding				
Papers:	Yes	No			
Intended Use 1	for Horse:				
Brief descripti	ion of experience of Ado	pter			
Will horse be l	boarded?: Yes No	•			
	s, and phone number of l	location v	where horse will be kept:		
Approximate 1	number of horses curren	tly maint	ained at above location:		
Will this horse	e be kept primarily in a:	Stall	Field with run-in shed	Other	
	e receive regular turnout size of paddock:				
Type of fencin					
Name and pho					
	one number of farrier:				
Will you be wo	orking with a trainer?	Yes	No		_
Trainer Name	and Phone number:				
Signed		Ву	y <b>:</b>		Date:
Applicant			Print Name		