

# PEACE POINT EQUESTRIAN CENTER



## DONOR APPLICATION

304-829-4800  
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PO Box D  
Bethany, WV 26032  
INFO@BPPEF.COM  
www.peacepointfarms.com

### Donor of Horse

Name : \_\_\_\_\_ Date : \_\_\_\_\_

Address : \_\_\_\_\_ Home / Work Phone : \_\_\_\_\_

\_\_\_\_\_ Cell Phone: \_\_\_\_\_

City, State, Zip : \_\_\_\_\_

Do you have registration papers or vidoes available? \_\_\_\_\_ Can you provide copies? \_\_\_\_\_

### Horse Description

Name of horse you would like to donate : \_\_\_\_\_

Is the horse registered ? \_\_\_\_\_ If so, with what registry? \_\_\_\_\_

Color and Markings : \_\_\_\_\_

YOB : \_\_\_\_\_ Appx. Weight : \_\_\_\_\_

Height : \_\_\_\_\_ Gender : \_\_\_\_\_

Horse's Behavior (please circle the appropriate number below) :

- |   |           |
|---|-----------|
| 1 Overall Temperament (1 = highly spirited, 5 = very quiet)                   | 1 2 3 4 5 |
| 2 Behavior towards people (1 = aggressive or afraid, 5 = very friendly)       | 1 2 3 4 5 |
| 3 Behavior towards other horses (1 = aggressive or afraid, 5 = very friendly) | 1 2 3 4 5 |
| 4 Behavior towards dogs (1 = aggressive or afraid, 5 = very friendly)         | 1 2 3 4 5 |

Level of Rider Needed: \_\_\_\_\_ Beginner \_\_\_\_\_ Intermediate \_\_\_\_\_ Advanced

Has this horse had experience in any of the following? Check all that apply.

Trail  
 Hunt Seat  
 Dressage  
 Eventing  
 Western Pleasure  
 Driving  
 Other \_\_\_\_\_

Does this horse have any vices? Check all that apply and explain if "Yes."

Crib     Weave     Stallwalk     Other  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is this horse easy to....

Lead     Tie     Trailer     Clip

### Horse Health History

Describe any current or previous health or lameness problems :

Surgeries, respiratory ailments, vision problems, recurrent colic, lameness problems, etc...

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does the horse have any special needs or require any special medications? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Has this horse had any vaccine reactions or other known allergic reactions? \_\_\_\_\_

If so, to what? \_\_\_\_\_

Is the horse current on vaccinations? \_\_\_\_\_ If so, which ones and when were they last given?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does the horse have a current (within 6 months) negative Coggins test? \_\_\_\_\_

When was the last time the horse's teeth were floated? \_\_\_\_\_

When was the last time the horse was wormed? \_\_\_\_\_

When was the last time the horse's hooves were trimmed? \_\_\_\_\_

Does the horse require any special corrective shoeing? \_\_\_\_\_ If yes, for what condition? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What kind of housing situation and fencing is the horse used to? (Pasture, stall, electric fence, etc.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Has the horse been turned out with other horses? \_\_\_\_\_

What and how much is the horse currently being fed? \_\_\_\_\_

Is there anything else you can tell us about the horse that will enable us to provide proper care? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

For mare owners: To what degree has your mare displayed difficult behavior during heat cycles? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Briefly describe any breeding history : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If so, any foaling complications? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Cost

What is the estimated value of the horse and/or equipment you are thinking of donating? \_\_\_\_\_

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I Understand that the horse will belong to Peace Point Equestrian Center during a 30 day trial. If the trial does not work out the horse will be returned to me.

\_\_\_\_\_ YES

\_\_\_\_\_ NO

If the horse is valued over 5k, for IRS purposes, it should be appraised by a certified person.