

Safe Stalls Application Form Rescue Referral

The Safe Stalls Program is a nationwide network of horse industry professionals, horse rescue organizations, individual horse owners and enthusiasts, volunteers, and others offering in-kind, financial, and other resources to horses in need.

Safe Stalls partners may be able to assist immediately following a rescue with needs ranging from transporting rescued horses to temporary shelter to providing food or other interim services needed during the horses' transition from the temporary shelter to a foster or adoptive home.

The goal is to be able to call on caring and capable people in the area of the rescue, and to be able to move horses quickly from danger to safety, then provide necessary care until they can be rehomed.

Thank you for taking the time to complete this application. The information will remain confidential and used only as part of The HSUS Safe Stalls Program.

Section 1: Rescue Information

Please list the rescue you are providing a referral to: _____

Rescue Contact Name: _____

Mailing Address: _____ City: _____ State: ____ Zip: _____

Phone: _____ E-mail: _____

Section 2: Your Contact Information

Please check the following:

Veterinarian 6-digit National Accreditation #: _____

Veterinarian Name: _____

Clinic Name: _____

Government Agency

Contact Name: _____

Organization: _____

Mailing Address: _____ City: _____ State: ____ Zip: _____

County: _____ Fax: _____

Phone 1: _____ Phone 2: _____

Website: _____ E-mail: _____

Section 3: Rescue Animal Information

How many horses in total are on the facility? _____

On the Henneke scale of 1-9, how would you rate the body condition of the majority of the horses? _____

Section 4: Rescue Housing/Facility Information

Please check the boxes for all that apply and fill out the information below. Please note N/A for items which are not applicable:

1. Barns # of Horses Currently: _____

Stall Sizes: _____ Number of Useable Stalls: _____

Describe overall condition: _____

2. Stalls # of Horses Currently: _____

Stall Sizes: _____ Number of Useable Stalls: _____

Shelter/Run-In Sizes: _____

Describe: _____

3. Pasture # of Horses Currently: _____

Sizes: _____ Type: (Dry lot, grass, etc.) _____

Number of Horses Maximum: _____

Describe how Horses Are Grouped (age, gender, etc.): _____

Horses Are Fed: Hay Allowed to Graze Both

Describe: _____

4. Isolation/Quarantine Area # of Horses Currently: _____

Where is it located on the property? _____

Number of horses maximum in the area: _____

5. Arenas Available to HSUS Horses? Yes No

Number of Arenas: _____ Sizes: _____

Number of Round Pens: _____ Number of Bull Pens: _____

Footing Type: _____ Footing Quality (1-5): _____

Turnout Available: Yes No

6. Fencing

Pipe Wood Plastic Chain Link Barbed Wire Electric Tape/Rope Other: _____

Describe: _____

Condition: _____ Safety: _____

7. Water

Barn/Stall Water Systems

Buckets Troughs Automatic Waterers Other: _____

Describe Availability: _____

Describe Cleanliness: _____

Paddock/Pasture Water Systems- Please check all that apply:

- Buckets Troughs Automatic Waterers Tanks
 Naturally Occurring (Ponds/Streams/Lake, etc.) Other: _____

Describe Availability: _____

Describe Cleanliness: _____

8. Other Animals

List other animals who live at the facility: _____

9. **Overall- Rate (1 = poor; 5 = excellent) and Give a Brief Description for Each:**

Safety: _____

Cleanliness: _____

Bedding: _____

Manure removal: _____

Fly control: _____

Is the facility in compliance with the AAEP Care Guidelines for Rescue and Retirement Facilities? Yes No

Please visit the AAEP website for more information: www.aaep.org/pdfs/rescue_retirement_guidelines.pdf

I certify that the information given is complete and accurate to the best of my knowledge. The terminology used to describe participating organizations does not infer any legal partnership or joint venture and neither The HSUS nor Safe Stalls partner shall suggest or indicate that one exists or hold itself out in that fashion. I certify that I am authorized to sign this application on behalf of the aforementioned organization.

Signature: _____ Date: _____

Print Name: _____ Title: _____

Please feel free to attach a separate sheet of paper if you would like to provide additional information.

Please return the completed application form to:

**The Humane Society of the United States
Safe Stalls Program
c/o Ashley Wolford
700 Professional Drive
Gaithersburg, MD 20879**

or via e-mail:

awolford@humanesociety.org