

NM Horse Rescue at Walkin N Circles Ranch PO Box 626 Edgewood, NM 87015

(505) 286-0779

ADOPTION AGREEMENT AND COVENANT

THIS ADOPT	TION AGRE	EEMENT (hei	reinafter referred to as	the "Agreement"), ente	ered into on this	day
of,	20	between			(hereinafter know	/n as
the "Adopter"	', singularly	or collective	ly) and New Mexico Ho	orse Rescue at Walkin	N Circles Ranch, Inc.	
(hereinafter "	WNCR"), is	s a legally bin	ding agreement deline	ating the terms and co	nditions of the adoption	on of
the equine cu	urrently kno	own to all part	ties as	(he	ereinafter "Equine"). T	he
details of Equ	uine are as	follows:				

Y.O.B	COLOR	BR	EED	GENDER
MICROCHIP #		MARKINGS		

DESCRIPTION OF EQUINE'S PHYSICAL CONDITION AT THE TIME OF THIS AGREEMENT:

The Adopter and WNCR hereby agree to the following terms:

- Upon receipt of this signed Agreement, WNCR agrees to transfer possession and ownership of Equine to the Adopter subject to the conditions set forth in this agreement. The Adopter understands that an adoption fee in the amount of \$_____ shall be paid to Walkin N Circles Ranch with cash, a credit card, a cashier's check or a money order. This Agreement will not be signed until after Equine has been delivered to the Adopter's property.
- 2. WNCR makes no implied warranties as to the marketability or fitness for any particular purpose of any Equine offered for adoption. While WNCR will assist with assessing a particular horse's suitability for an Adopter, it is ultimately the sole responsibility of the Adopter to carefully consider Equine's abilities, health and additional relevant attributes and make their selection of Equine accordingly.
- 3. The Adopter understands that many of the conditions of Equine are not obvious, and WNCR does not know all of the details of Equine's history and makes no claims to that effect. The Adopter understands that Equine may have health limitations due to previous instances of abuse and/or neglect. WNCR has provided the Adopter with any of Equine's health records known to exist both prior to the time WNCR took possession and while Equine was in WNCR's care. WNCR has also provided the Adopter with information about any specially required medications and nutritional needs of Equine. The Adopter understands that WNCR is making these disclosures in the best interest of Equine and as a courtesy to the Adopter; these disclosures are merely opinions, and should not be considered a claim, representation or warranty as to the temperament, health or mental disposition of Equine.

- 4. The Adopter understands there may be limitations as to the type of riding appropriate for Equine and agreed to ride Equine only in accordance with those limitations in order to prevent injuries to Equine or the Adopter.
- 5. Examination of Equine prior to adoption is the sole responsibility of the Adopter. The Adopter acknowledges that Adopter has been advised by WNCR to consult with a licensed veterinarian and/or an experienced horseperson prior to adoption to complete an independent evaluation of Equine if desired.
- 6. The Adopter will, at his or her expense, care for Equine in a responsible and humane manner, including but not limited to providing adequate shelter, feed, turnout, worming, farrier, veterinary, and dental care. The Adopter will ensure that Equine is kept in an environment free of abuse, neglect, poor handling or mismanagement. *Refer to Pre-Adoption Inspection Checklist.*
- 7. The Adopter or any other individual or organization in possession of the Equine as of the date of the agreement and any time thereafter is bound to not sell the Equine at auction for slaughter or allow the Equine to be sold, transferred, released, or otherwise placed into possession of any person or organization that will cause or allow the Equine to be sold at auction for slaughter. The Adopter also promises Equine will not be used to race, nor will it be bred. If Equine is pregnant at the time of adoption the Adopter will castrate any male offspring and provide proof of castration to WNCR by the foal's second year. If this section of the Agreement is breached, Equine and any of Equine's offspring will be returned to WNCR at the Adopter's expense.
- 8. The Adopter may return Equine to WNCR at any time and for any reason if they are unable to care for Equine or if Equine is no longer wanted. In the event that Equine is returned at any time after the Adopter takes ownership, WNCR will not refund any monies paid as an adoption fee and/or donation for Equine, regardless of the reasons for the return. WNCR may also charge a surrender fee of \$275, and/or charge a reasonable amount for the transport of Equine to WNCR if needed. If Equine is surrendered back to WNCR by the Adopter, the Adopter will not be able to work with Equine as a volunteer at WNCR. Further, once a surrender is finalized, the Adopter/Former Owner will generally not be able to adopt another WNCR horse in the future. There may be an exception in cases where the surrender takes place within 90 days of an adoption, or in cases in which extraordinary circumstances exist.
- 9. The Adopter understands that WNCR will contact you for a short period of time after the adoption to provide support, if needed, and to check on the progress of Equine. We also encourage the Adopter to contact us with any questions or just to let us know how the Equine is doing.
- 10. In signing this Agreement, the Adopter swears they have never been charged with or convicted of any crime involving animal abuse in New Mexico or in any other state or country. If at any time WNCR becomes aware of such a charge or conviction, possession and ownership of Equine will automatically revert back to WNCR.
- 11. The Adopter agrees that this Agreement is governed by the laws and regulations of New Mexico. The Adopter further agrees that, should any disputes arise, all legal proceedings must be filed, mediated, arbitrated, heard, tried and decided in New Mexico.
- 12. In the event of a breach of this Agreement, WNCR will use all legal means to enforce its terms, including but not limited to making a report to a relevant law enforcement agency or to the New Mexico Livestock Board and filing a civil suit.

- 13. The Adopter agrees to hereby indemnify and hold WNCR and its officers, directors, and volunteers harmless from and against any and all claims, actions, damages, liability, and expense in connection with the loss of life, personal injury, and/or damage to property arising out of use or care of Equine. The Adopter also agrees WNCR shall be held harmless for any current illnesses, or future illnesses/injuries of Equine pursuant to the New Mexico Equine Liability Act, NMSA 1978 42-13-1 to 42-13-5 and any subsequent revisions.
- 14. The Adopter agrees that WNCR may use any photographs or video of Equine in any way it deems appropriate to support its mission, including, but not limited to, fundraising purposes.

I, the Adopter, have had the chance to review this document and/or have it reviewed by an attorney if I so choose, and I understand and agree with all the terms herein.

Adopter	Date				
Adopter	Date				
NEW MEXICO HORSE RESCUE AT WALKIN N CIRCLES RANCH, INC.					
Ву					
Title					
Signed					

ADOPTER'S CONTACT INFORMATION

Please print or write legibly.

EQUINE NAME			
Adopter 1			
Name			
Address			
City			
Mailing Address (if different)			
City	State	Zip	
Email Address			
Phone	Alternate Phone		
Driver's License #	State	Exp	
Adopter 2			
Name			
Address			
City			
Mailing Address (if different)			
City	State	Zip	
Email Address			
Phone			
Driver's License #	State	Exp	

VETERINARY, FARRIER AND BOARDING INFO

Please print or write legibly.

EQUINE NAME _____ **Primary Veterinarian** Name _____ Business Name _____ Address _____ City _____ State ____ Zip _____ Email Address Phone _____ Farrier Name _____ Business Name Address City _____ State ____ Zip _____ Email Address ____ Phone ______ **Boarding Facility** (if applicable) Business Name Contact Person Address _____ City _____ _____ State _____ Zip _____ Email Address Phone

EQUINE MEDICAL CONFIRMATION AND HEALTH INFORMATION

Note: Health records or additional descriptions may be attached where appropriate *Please print or write legibly.*

EQUINE NAME			
<u>Immunization</u>	Date		
EWT-FLU-RABIES-WNV			
Coggins Test			
Deworming			
Farrier/Hoof Work			
Microchip #			
Veterinarian's Name			
Known health history and	or health problems		
Recommended medication	ns, treatments, and supplei	ments	

(Continued on next page/back)

ADDENDUM 3 (continued)

EQUINE MEDICAL CONFIRMATION AND HEALTH INFORMATION

EQUINE NAME		
Nutritional needs		
Riding limitations		
Other notes		
WNCR Staff Member	Position	
Signature	Date	

EQUINE TRAINING INFORMATION

Please print or write legibly.

HORSE NAME Ground training of Equine Saddle training of Equine Cart training of Equine Continued training recommendations for Equine WNCR Staff Member _____ Position _____ Signature _____ Date _____