



FERNE
ANIMAL SANCTUARY

Chard, Somerset, TA20 3DH
telephone: 01460 65214
e-mail: info@ferneanimalsanctuary.org
Registered Charitable No. 245671

BORROWER' S APPLICATION FORM
FOR NON-RIDDEN COMPANION HORSES AND PONIES ONLY

Please note that ALL sections SHOULD be completed.

DATE OF APPLICATION: / /

Mr / Mrs / Miss / Ms NAME:.....

ADDRESS:

..... POSTCODE:

TEL.NO. (HOME)TEL.NO. (WORK)

E-MAIL:

Address where horse is to be kept (if different): (Please tick as appropriate)

- Livery yard Rented grazing Riding School Working Farm

NAME AND ADDRESS OF YARD:.....

.....

COUNTY: POSTCODE:

Proposed carer(s) details:

NAME: NAME:

Age:..... Age:

Experience:..... Experience:

.....

.....

How did you hear of the scheme?

.....

Details of the type of companion wanted:

1. For what purpose do you want a non-ridden companion horse or pony?

(please tick as applicable)

- To provide company to an existing ridden horse or pony.
- To provide company to an old or retired horse or pony.
- To provide company to a foal or youngster not yet in ridden work.
- To give a companion horse or pony a home with existing horses and ponies.
- As a pet animal.

2. Ideally, what type of horse or pony are you looking for?

(please tick as many as apply)

- | | |
|---|---|
| <input type="checkbox"/> Hunter type | <input type="checkbox"/> Under 10 years old |
| <input type="checkbox"/> Riding horse type | <input type="checkbox"/> 10-19 years old |
| <input type="checkbox"/> Cob type | <input type="checkbox"/> 20+years old |
| <input type="checkbox"/> Native pony type | <input type="checkbox"/> Mare |
| <input type="checkbox"/> Mini (Shetland type) | <input type="checkbox"/> Gelding |

Details of any existing horses/ponies with which the companion will be living:

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3. What management regime will be used for keeping and caring for the companion? (please tick as applicable)

- Living permanently at pasture with access to shelter.
- Living at pasture for much of the time, stabled for some periods of time (i.e. poor weather, ill health etc.).
- Combination of turn out at pasture and stabling (i.e. over night/daytime, winter months/summer months).

Further Management Details:

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.....

4. Will the management regime of the other horses be the same as for the companion? (please tick as applicable)

- Yes
- No, please give details below.
- Some of the time, please give details below.

Details of how the regimes will differ:

.....

.....

5. Will the companion be left on its own at all? (please tick as applicable)

- No, never
- Occasionally for short periods (i.e. when other horse is exercised)
- Occasionally, for longer periods (i.e. when other horse is at an event)
- Regularly, for short periods (i.e. when other horse is exercised)
- Regularly, for longer periods (i.e. when other horse is stabled or at an event)

(Continued from section 5)

Please give further details of periods where the companion will be left:

.....
.....
.....

6. Please give details of any ailments/aspects of management that you feel you would be unable to accommodate.

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7. Please give details of the facilities where the companion will be kept:

How much acreage is available in total?

How many horses and ponies are turned out on the same land?

Is the pasture sub-divided into several smaller paddocks?

How often do the horses get turned out and for how long?

How would you restrict grazing if needed?

Do the horses stay with the same group of horses?

What type of fencing is there?.....

Is mains water, electricity lighting and hard standing available?
.....

(Continued from section 7)

What facilities are available should your horse be ill or injured?

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What shelter is available in the field?

What pasture management is carried out?

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What worming programme is used?

8. Please give details about the routine care of the horse:

Are you the primary carer for the companion? If **NO** please state who will be and what the arrangement is.

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Who will care for the companion if you are unable to do so for any reason (i.e. ill, on holiday etc.)

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Please give the full name, address and telephone number of the veterinary surgeon you intend to use.

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Does/will your veterinary surgeon also provide routine/specialist dental care for the companion? If no, please give details of the professional who will be doing so.

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Please give any further information that you think will be relevant to your application (please continue on the back of the form if necessary).

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Please note any horse homed as a companion by Ferne Animal Sanctuary has been thoroughly assessed and deemed unsuitable for riding due to behavioural or veterinary problems which will be discussed with you in more details when appropriate. Any persons found to be riding / 'working' a companion horse will be in breach of their contract and that equine will be removed from the home.

If we do not currently have a companion suited to your requirements, this application form will be kept on file for reference for 6 months only. If you are still looking for a companion after that period, please contact in good time so that your details may be refreshed.

Please return to:

**Ferne Animal Sanctuary
CHARD
Somerset
TA20 3DH**

Tel: 01460 65214