



Voluntary Release and Assignment of Custody/Ownership of an Equine

I/We \_\_\_\_\_ are the legal owner(s) of the following equine named and described as follows (if registered, include registration numbers and name of registry):

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I/We are the legal owner(s) of the above listed equine. I/We do hereby voluntarily transfer ownership, control, and custody of said equine to USESR. I/We understand that I/we will receive no remuneration for said equine. Further, I/we understand that USESR may, at its sole discretion, provide perpetual sanctuary or locate a permanent adoptive home for said equine. In extreme cases of suffering, said equine may be put to sleep.

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Owner's Witness

\_\_\_\_\_  
Date

\_\_\_\_\_  
USESR Officer

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

SPACE BELOW RESERVED FOR NOTARY PUBLIC

PLEASE MAIL TO: USESR/769 PR 3204/BRIDGEPORT, TX 76426  
(PLEASE SEE REVERSE SIDE FOR IMPORTANT INSTRUCTIONS)

### Donation Checklist:

- Ⓜ Have you included a copy of the animal's negative coggins test that is less than 3 weeks old?
- Ⓜ Have you included the \$200.00 donation fee?
- Ⓜ Have you included a copy of the animal's registration papers?
- Ⓜ Have you included copies of the animal's veterinary records?
- Ⓜ Have you had this donation contract notarized?

Please remember that the more you tell us about your equine's feeding habits, favorite past-time, preferences, etc., the better care we can take of him/her. Date of last trim, vaccination, & worming (including product) will be extremely helpful to us. Please write out this information on a separate sheet of paper & send it with this contract or keep it with the equine.

### GENERAL INSTRUCTIONS:

YOU MAY DELIVER THE EQUINE TO USESR. IF USESR IS TO PICK UP THE EQUINE, THERE WILL BE A CHARGE IN ADDITION TO THE DONATION FEE. THE CHARGE WILL DEPEND ON THE ROUND TRIP MILEAGE TO PICK THE EQUINE UP.

YOU MAY REQUEST TO VISIT THE EQUINE AND TO KNOW WHERE HE/SHE IS PLACED AT ALL TIMES. YOU MAY ALSO REQUEST TO KEEP YOUR IDENTITY PRIVATE FROM ANY FOSTER CARE PROVIDERS OR ADOPTERS.

PLEASE UNDERSTAND THAT USESR MAKES EVERY EFFORT TO ACCOMMODATE THE WISHES OF ALL OF OUR DONORS. WE APPRECIATE YOUR TRUST IN US AND VOW TO DO OUR VERY BEST TO SEE TO IT THAT THE EQUINE YOU DONATE WILL HAVE A SAFE, HAPPY, PERMANENT, LOVING HOME FOR LIFE AND WILL RECEIVE THE VERY BEST OF CARE ALWAYS.

PLEASE PRINT YOUR NAME, ADDRESS, AND PHONE NUMBER SO THAT WE CAN PROPERLY CREDIT YOU AT TAX TIME. THANK YOU.

NAME/PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_