



## **FOSTERING APPLICATION FORM**

Name

Any other name in use

Address

Postcode:

Email

Telephone

Mobile

Age

Height

Weight

Relevant Qualifications  
(if any)

### ***Preferred requirements of horse to be fostered:***

Height (min) ..... hh (max) ..... hh

Age (min) ..... (max) .....

Type (eg. TB, Cob etc. please describe)

Sex (please circle)

Gelding

Mare

Either

Please provide details of your experience (e.g. how long you have been riding, owned horses, competitions, etc.)



**Where will the horse be kept?**

Address

Postcode:

Name of yard (if livery)

Name of Yard Owner(s)

Email

Telephone

What facilities will you provide? (please circle)

Stabling

Grazing

Fencing

Who will have day to day care of the horse?

Please provide details of your worming programme?

*All HRH horses have been worm counted and wormed as appropriate prior to their release for fostering. Worming will be done by HRH as per their normal worming procedures as and when necessary.*

Please provide name, address and telephone number of:

Vet:

Name:

Address:

Telephone:

Farrier

Name:

Address:

Telephone:



Any other  
professionals  
e.g. Physio

Name:

Address:

Telephone:

Please provide the name and address of 2 qualified persons who can provide references?

1.

2.

#### COMPANION ONLY

A horse rehomed to a foster home must **NOT** be ridden under any circumstances by any persons at any time during the term of the foster agreement.

You will be responsible for: (please put a x in circle)

- i. Nutrition. Including hard feed and forage
- ii. Water
- iii. Shelter
- iv. Veterinary care (routine yearly)
- v. Farrier care (every 6-8 weeks)
- vi. Dental work (yearly)