

Remember Me Rescue - Retired Racehorse Donation Form

Thank you for considering donating your retired racehorse to Remember Me Rescue. Please fill out the form below.

Donor Information

- Name: _____
- Address: _____
- City: _____
- State: _____
- Zip Code: _____
- Phone Number: _____
- Email Address: _____

Horse Information

- Horse's Name: _____
- Age: _____
- Breed: _____
- Color: _____
- Sex: _____
- Tattoo Number: _____
- Microchip Number: _____

Health and Behavior Information

- Health Issues: _____
- Current Medications: _____
- Allergies: _____
- Vaccination History: _____
- Behavioral Issues (**cribbing, weaving, buck, rear, kick, etc**):

- Special Requirements: _____
- **Donation Amount (\$500 for sound and rideable, \$1000 for rehab needed)** _____

Racing History

- Number of Races: _____
- Last Race Date: _____
- Reason for Retirement: _____

Additional Information

- Any Additional Information: _____

Owner's Certification

By signing below, I certify that all information provided in this form is accurate to the best of my knowledge, and I agree to donate the above-mentioned horse to Remember Me Rescue.

Owner's Signature: _____

Date: _____

Contact Information

If you have any questions, please contact Remember Me Rescue at **817-689-1214** or **remembermerescue@live.com**.