

Dear Horse Owner,

Thank you for your interest in the potential use of your horse in our recreational therapeutic riding program. Project R.I.D.E., Inc. is a 501© (3) non-profit organization and a premier PATH Intl accredited facility. Our programs serve children and adults representing more than 50 different disabilities.

Enclosed in this packet you will find the following:

* Trial Horse guidelines
* Trial Horse selection process
* Trial Horse application

**Please read through the guidelines and process, fill out the application, and return by fax or email. Once the application is received veterinary information may be requested.**

The members of our horse selection committee will review your application. We will contact you if we have decided to further evaluate your horse for our program. Please call if you have any questions regarding the trial process or if you would like to make arrangements to come and visit our facility. We will let you know if we have decided to evaluate your horse for our program.

Best Regards,

Lauren Hieb

Project R.I.D.E. Instructor

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**Trial Horse Guidelines**

**Not all horses are good candidates for a therapeutic riding program. Please review the guidelines we’ve established for our facility to best determine if your horse is a possible candidate.**

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| --- | --- |
| Age | 10 and up; horses and ponies outside this range are considered on a case by case basis. |
| Gender | Geldings preferred, mares accepted; no stallions. |
| Height | 14H- 15.3H; horses not within this range are considered on a case by case basis |
| Soundness | The horse must have a free moving stride with no physical problems that would cause it to be uncomfortable (with or without a rider) at the walk and trot. The horse must be sound and comfortable without the need of corrective shoes, feed supplements or medications. (Case by case basis) |
| Condition & Conformation | The horse must be in good physical condition. (Weight, coat, feet, vision). |
| Temperament & Vices | The horse must be calm, quiet, and react positively to human interaction. The horse must be trustworthy on the lead line and with a beginner rider. The horse must not bite, kick, buck, pace, crib or wind-suck.  |
| Training | The horse must be completely saddle broke and trained. Project R.I.D.E. is not able to accept green or untrained horses.  |
| Trial Period | Owners must agree to a trial period whereby their horse lives at our facility while its suitability for therapeutic riding is thoroughly evaluated. Per a signed agreement, Project RI.D.E., Inc. will provide feed and care. Owners have full responsibility for hauling their horse to and from our ranch in Herald, CA at the beginning and end of the trial period. During this trial period, the horse will be exposed to therapy equipment e.g., balls, mounting blocks, walkers, wheelchairs, toys, sidewalkers, leaders, loud noises, sudden movements, unbalanced weight on its back and pressure on all parts of its body. The horses’ body language and reactions will be noted and graded. Also taken into consideration will be: 1) does the horse accept and comply with what it is being asked; 2) does the horse demonstrate a patient and tolerant attitude; 3) how quickly does the horse improve upon any negative reactions.  |



**Trial Horse Selection Process**

**Horse Selection Committee Visit**

Once the trial application is received, our horse selection committee will determine if an “in person” visit should be arranged. After this visit, our horse selection committee will decide if your horse is a good candidate to enter our trial period.

**Trial Period and Financial Responsibility**

Our trial period has been developed to best determine that the right horses are accepted into our program. Project R.I.D.E. Inc., will accept financial responsibility for the feed, farrier, care, and boarding. The owner will accept and pay for any veterinarian fees incurred by their horse during this trial period, and accepts responsibility to haul their horse to and from the Project R.I.D.E., Inc facility when needed. Owners are always welcome to come by and visit their horse during this period by making an appointment during our regular business hours.

While on trial, the horse will be exposed to all common facets of a therapeutic riding program which may include toys, balls, music, loud noises, sudden movements, wheelchairs, walkers, mounting blocks, various mounting techniques, being ridden by balanced and unbalanced riders and other desensitizing as needed. The horse’s body language and reactions will be noted and graded.

The trial agreement may be terminated by either party, for any reason, by giving 24 hour notice to cancel the agreement and by scheduling an appointment with a Project R.I.D.E., Inc staff member for the removal of the horse during our regular business hours.

**Completion of the Trial Period**

After a successful completion of the trial period, the horse will be accepted into the program and the lease loan paperwork will be completed.

**Horse Retirement/Removal from the Program**

To remain in our program, horses must be able to perform their jobs and remain useful. Horses that are no longer useful to the program will be returned to the owner. All decisions are made with the programs best interest at heart. Possible reasons for program removal would include but are not limited to:

* Health, injury or soundness issues rendering the equine unable to perform its job.
* Inappropriate, unsafe behaviors such as bucking, rearing, biting, kicking.
* Equine is emotionally/physically unable to cope with the pressure of the job.
* The program must cut down the herd for financial purposes.

The information above is not intended as legal or financial advice. It is to assist you in your decision to determine whether or not your horse is a good candidate in becoming a therapy horse. Please feel free to contact us if you have any questions; we look forward to meeting you and your horse.

**Project R.I.D.E. Trial Horse Application**

Owner Name­­­:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Horse:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Gender:\_\_\_\_\_\_\_\_\_\_\_\_\_\_Color:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Breed of Horse:­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age:\_\_\_\_\_\_\_\_\_\_\_ Height: \_\_\_\_\_\_\_\_ Weight: \_\_\_\_\_\_\_\_\_

How long have you owned this horse?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What size riders has the horse carried/can carry?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Riding style/Training: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 When were they ridden last / how often are they being used:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of Bridle/Bit:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are they in a stall or pasture /Alone or with others: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Farrier Service: Barefoot \_\_\_\_\_\_ Shod: Front\_\_\_\_\_ All\_\_\_\_\_ Corrective: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you agree to give Project R.I.D.E. Inc., permission to discuss your horse’s medical records with your veterinarian? YES NO

Medical Illnesses/Injuries in the past year? YES NO Lameness in the past year? YES NO

If yes, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Medications: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are they current on their shots & worming / what are they on: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of Feed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount of Feed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supplements:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Allergies:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vices/Bad habits (Cribbing, weaving, etc): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Trailering Behavior:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Why would you like Project R.I.D.E. to have this horse? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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***I have read the complete horse trial packet and understand the Trial Period***

Signature of Owner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*\*Please note you will only be contacted if our horse selection committee has decided to further\*\* review your horses’ application for inclusion in our program, Thank You.**