

Emergency Equine Instructions Form

EMERGENCY EVAUCATION/CARE-The main reason for this form is in the case your horse has to be removed from your facility for any emergency situation (fire, flood, etc.) and you are not available or cannot be contacted.

Facility Where Animals are located: _____

Address: _____

Name of Equine: _____

Brief Description: _____

Owner's Home Phone: _____

Cell Phone: _____ Work Phone: _____

Alternate Contact: _____ Phone: _____

Veterinarian: _____ Phone: _____

Location of halter and lead: _____

Please list medications and/or tranquillizers your animal may be allergic to

Have the attending evacuation team transport the horse to the nearest safe holding facility.

Have the veterinarian administer tranquilizers to help with transport if necessary.

If the attending evacuation team is unable to catch or transport my horse, I give them permission to turn it loose to get it out of immediate danger.

Please check any or all of the above

I have read the Emergency Equine Instruction Form and authorize the actions I have indicated above and I hold harmless rescue volunteers/transporters for any injuries incurred during the rescue.

Owner Signature: _____ Date: _____