



**Barefoot Crow Animal Rescue,
Inc.
2986 130th Ave.
Glenwood City, WI 54013
715-702-1015**

Office Use Only
Date Received:
By:
\$Amount:

Livestock Application/Adoption: _____ Animal's Name: _____
Revised: June 2021

To be considered for adoption of a _____ you need to:

- Be at least 18 years old.
- Have the knowledge and consent of all adults living in your household.
- Have a valid government-issued photo ID.
- Have landlord's consent to bring an animal onto the property.
- Understand that you are making a lifetime commitment to the animal. If this is your first _____, take the time to research very carefully what it takes to feed, shelter, and care the animal. Be sure to talk with your veterinarian and other people.
- Understand that _____:
 - Are heard animals and do not do well living alone. Therefore, Barefoot Crow requires that at least two _____ be adopted if you do not already have _____.
 - Will eat almost anything – your shoes, front door, and just about anything else that is lying around!
 - Like to head-butt which can hurt if they have horns. REMOVING THE HORNS IS NOT AN OPTION. If you adopt a goat with horns, Barefoot Crow Rescue requires that you leave the horns intact. We recommend that you do not handle the horns or play with their heads as this encourages them to use their heads when they interact with you.
 - Climb amazingly well so you may need a tall fence.
 - Make wonderful pasture pals for horses but the fencing must be able to contain them.
 - Can be challenging – both naughty and nice! A sense of humor and a high level of tolerance go a long way in dealing with the antics of goats.
- Understand that goats and sheep are considered to be livestock and that it is your responsibility to check the current zoning laws where you live.
- Understand that Barefoot Crow reserves the right to 1) conduct a property and facility check prior to adoption and 2) refuse the adoption of any animal.
- Provide the name and contact information of 1 or more references [attach].

Applicant Information

Name [first, middle, last]: _____

Mailing Address: _____

City, State & Zip: _____ County: _____

Home Telephone: _____ Work Telephone _____

Cell Phone: _____ E-mail Address: _____

Do you Own or Rent your House? If you rent, provide the Name of your

Landlord/Management Company _____ and Phone: _____

Are you zoned for livestock where you live? Yes No

Do you currently have other animals? Yes No If yes, please list:

Will you be the person responsible for the care of the goat or sheep? Yes No If not, who will be?

What is your current or past experience with _____?

If the animal is to be a companion for another animal, tell us about that other animal.

Describe how the animal will be housed:

Is there sufficient pasture? Yes No

Is there shelter? Yes No

Is there access to clean water? Yes No

Is there secure fencing? Yes No

Will you provide appropriate feed for the animal? Yes No

Will you provide appropriate veterinary care including deworming medication, care of the animal's feet and teeth, vaccinations, and other medications along with emergency expenses, supplies and feed for the lifetime of this pet? Yes No If you have a veterinarian, please provide contact information:

By signing below, I certify that the information I have given is accurate and complete. I hereby grant Barefoot Crow Animal Rescue permission to confirm any information provided in this application/adoption agreement with any appropriate third party including landlords and veterinarians. I agree to pay HDAR the adoption fee of \$ _____. I understand that if I can no longer care for the goat/sheep that I may return the animal[s] to Barefoot Crow but that no portion of the adoption fee will be returned. I understand that once the adoption is finalized 1) I will be responsible for all medical bills and decisions regarding the animal[s] and 2) I agree that neither Barefoot Crow nor its Board Officers/Members, volunteers, or agents will be liable for any damages or injuries caused to me or any third person by the animal[s].

Applicant/Adopter Signature: _____ Date: _____

Approved By: _____ Date: _____

Disapproved By: _____ Date: _____