

Mail Application to:
Mending Hope Equine Rescue
337 Townline Road Fairmount City, PA
16224
Or email to
m.h.equinerescue@gmail.com

2024 FOSTER/TRAINER APPLICATION M.H.E.R. EQUINE ELEVATION CHALLENGE

Application Deadline: March 10, 2024

This challenge is to help the equine within our Rescue have a better chance of being adopted into a forever home. To bring awareness to the public about mustangs and the rewards of second chances for these equines.

Participation in this event is by invitation only; therefore, Mending Hopes Equine Rescue's board of directors has the right to determine eligibility, at any time, remove a contestant from the competition and/or remove the equine from fostering for any or no reason at all.

FOSTER/TRAINER INFORMATION:	
Name:	Birthdate:
Mailing Address:	
City/State/Zip:	
Physical Adress:	
Phone Number:	Alt Phone:
Email Address:	
Parent/Guardian Name (if applicable):	Phone:
Age: Youth 12-17, adults must l	be 18 at the time of application.
Male Female	
Pick up location is 337 Townline Road Fairmour	nt City, PA 16224 tentatively last week of March first Week of
April 2024.	

Mending Hope Equine Rescue

All Questions Must be Answered.

1.	Have you ever been accused or convicted of animal or human abuse/neglect/cruelty If yes,
	explain:
2.	Do you have a strong horsemanship foundation?
3.	How many years have you trained horses?
4.	Are you a professional trainer or receive compensation for training?
5.	Do you compete in horse-related events? If yes, which disciplines/breeds do you compete in?
6.	Have you ever fostered an equine? If so, for what organization?
7.	Do you or a family member own the facility where you will be training your foster?
	If no, please list NAME, ADDRESS, and PHONE NUMBER of the facility where you will be training your foster
8.	Veterinarian Phone Number: Email Address:
9.	Farrier Phone Number: Email Address:
10.	As the training level, handling and background of the equines here at that rescue varies, it is important that you understand you must have fencing that is appropriate for the equine you will be fostering and training. Five-foot fencing is recommended to start your training with. Submit pictures of your set up and support animals.
1.1	to start your training with. Submit pictures of your set up and current animals.
11.	Reference forms are included in this application. Your application will not be completed until we receive two completed
	references forms. You may use clients, industry professionals/associates, organization you fostered with previously, or anyone else who can attest to your animal welfare and horse training abilities. (no family members)
12.	Include a close-up photo of yourself to be used for promotional purposes.
	Include a short 3-5 sentence paragraph on why you feel you should be selected for the competition.
	Complete and Submit 1) application, 2) Humane Treatment Policy, 3) 2 –reference forms, 4) film/video release, 5) your
	photo, 6) your biography and 7) a photo of your set up and current animals.
By signin	g below, I am stating that:
	e to and will abide by the M.H.E.R. Equine Elevation Challenge Rules and Regulations and 2) I am aware and in agreement that participation in this event is
	tion only; therefore, Mending Hope Equine Rescue Board of Directors has the unqualified right to determine eligibility and can, at any time, remove a
,	iner from the competition for any reason at all. I am also stating that all questions above have been answered honestly by the foster/trainer applying ro the one. 3) I hereby WAIVE, REALEASE AD DISCHARGE, Mending Hope Equine Rescue, their board of directors, representatives, and volunteers from all
_	and any and all possible causes of action in law or in equity that may result from an injury to me or any else caring for or assisting in training (including
	by facilities or anyone in my are caused by the negligence or other actionable conduct of the Mending Hope Equine Rescue their board of directors,
represent	tatives, and volunteers; 4) I further agree to INDEMNIFY and HOLD HARMLESS Mending Hope Equine Rescue their board of directors, representatives,
and volun	nteers for damages, attorney fees and expenses resulting from an injury to me (including death), my facilities, or anyone in my care, even if such injury or
O	s caused or claimed to be caused by negligence or other actionable conduct of Mending Hope Equine Rescue their board of directors, representatives, and
volunteer	
	t's Signature: Date: Date:
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M.H.E.R. Equine Elevation Challenge

FOSTER/TRAINER REFERNCE FORM

Two Reference Forms must be submitted with each application.

If the individual providing the reference would like the information to remain confidential, please feel free to mail this form to Mending Hope Equine Rescue 337 Townline Road Fairmount City, PA 16224.

Name of the Foster/Trainer Applicant:
Foster/Trainer Applicant's Phone:
Name of Reference:
Reference Phone 1: Phone 2:
Reference Email:
1. How long have you known the applicant?
2. In what capacity do you know the applicant?
3. Do you feel that their facilities are suitable for working with a wild horse or one with little handling
4. Do you have any concerns about the horses in the care of this foster/trainer?
5. Would you recommend this trainer to people with unbroken or difficult horses?
Any additional comments:

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