



## Dream Catcher Therapy Center, Inc.

## End of the Trail Rescue, Inc.

## **Equine Hay Bank Application**

## Requirements for application:

- Single family horse ownership (not a non-profit, rescue, or foundation)
- A safe facility to maintain the horse
- Proof that horse is receiving appropriate care
- Documented financial need due to unemployment or financial hardship

Applicant Information				
Name:		Phone:		
Current Address:				
City:		State:	Zip:	
Own Rent	How Long?		ıg?	
Are you or your spouse currently employed?			Combined annual income:	
Reason for Financial Assistance:				
Horse Data:				
Location and description of facility where horses are kept:				
Name and phone of veterinarian:				
Date of last vet visit:				
Are you the legal owner of all horses listed below? Yes No				
Horse's name		Age	Health condition	
References:				
Name	Address			Phone
Will you be able to care for your equine after our support has ended and if so, what is your plan?				
There may be a site visit by DCTC to verify conditions of equine, facility, and to confirm financial need.				
Signature of Applicant:				Date: