

# Equine Advance Directive

In the event that I, as owner/guardian, am unavailable or unreachable, I would like the following plan for the care and safety of my horse to be thoughtfully implemented.

Date:

Name of Horse:

Age:                      Breed:

Physical Description:

#1 Veterinarian's Name:

Mobile #:

Clinic Name:

Phone #:

#2 Veterinarian's Name:

Mobile #:

Clinic Name:

Phone #:

#1 Emergency Contact (Agent) Name:

Mobile #:

Other Contact info:

#2 Emergency Contact (Agent) Name:

Mobile #:

Other Contact info:

Insurance (circle): YES   NO   Company Name:

Policy #:

Phone #:

Photo  
of my horse

Copy of  
Insurance Card

The Emergency Contacts and Veterinarians listed above shall be considered agents on my behalf in the event that I am unreachable or out of town.

My intentions, in the event that my horse becomes ill or injured include:

My intentions, in the event that the veterinarian recommends intensive/advanced care:

Financial considerations (initialed statement equals agreement)

Please do not exceed \$\_\_\_\_\_ in the treatment of my horse without first getting my approval. (initial:\_\_\_\_\_)

OR

Please use any means necessary to treat my horse. I accept full financial responsibility for all veterinary treatment. (initial:\_\_\_\_\_)

If my horse is suffering, from accident or illness, and stabilization or transportation to a recommended clinic are not possible or not in my horse's best interest or considered inhumane or against my wishes, the above stated agents are authorized to take appropriate action to gently and humanely euthanize my horse, keeping the following intentions in mind:

In the event that my horse must be euthanized, I wish to keep the following as a memento (i.e. horseshoe, tail, mane, halter, bridle, etc.):

I wish for my euthanized horse's remains to be (circle):

Cremated                  Transported for Rendering                  Other

(Please consult local laws if considering burial or composting)

**Owner/Guardian's Name:**

**Signature:**

**Mobile #:**

**Email:**

**Address:**

Questions about equine end of life support?  
Please reach out to Sam at Red Dog Ranch Equine LLC  
414-791-5696 | sam@rdrequine.com  
Please visit [www.rdrequine.com](http://www.rdrequine.com)