

BEARTOOTH BOARDING AND RIDING LLC

BOARDING AGREEMENT

ATTACHMENT for HORSES

Owner's Name: _____

Horse Name: _____ Registered Name _____

Breed _____, Mo/Yr of Birth ___/___, Height _____ hands

Registration No. _____ Markings, if any _____

Sex _____ Color _____

Behavioral History: Disclosure of known behavior is extremely important for the safety of your horses, other horses, and those caring for or coming in contact with the horses.

Circle any that pertains to this horse:

Cribs weaves rears bites bolts kicks spooks easily Tends to be dominate horse in a group

OTHER behaviors, good or bad _____

MEDICAL and VACCINATION HISTORY OF HORSE:

Date of last worming: _____ Type used: _____

Encephalomyelitis (sleeping sickness), Eastern & Western Strains Date: _____

Date of last vaccinations etc: West Nile _____ Rhino _____ Flu _____

Veterinary Coggins Test attached: _____ Health Certificate attached: _____

5 Way Vaccination proof attached: _____

Other _____

Health Issues:

Colic: _____ Frequency: _____

Founder: _____ When: _____

Other: _____ Description: _____

Allergies if known: _____

INSURANCE

Is horse insured?: _____ Insurance Carrier: _____

Policy # : _____ Carrier's Address: _____

Insurance Phone for emergencies: _____

Owner's Signature: _____ Date: _____