



HORSE BOARDING APPLICATION

**All applicants are required to fill out this form. Please complete all fields, sign and date the application.*

Owner's Information

Name: _____

Address: _____

Home Phone: _____

Cell Phone: _____

Riding Discipline: _____

Riding Experience/Level of Training: _____

Are you interested in taking riding lessons? _____

Are you interested in attending horse shows? _____

If so, what type (rated, local, SWVHJA, ETHJA, etc.) _____

Horse Information

Registered Name/Show Name: _____

Barn Name: _____

Breed: _____ Sex: _____ Age: _____

Height: _____ Weight: _____

Farrier Needs & Type of Shoeing (trim, shoes, four, front only, bars, pads): _____

Level of Training/Discipline: _____

Does your horse crib? _____ Does your horse chew wood? _____

Does your horse kick? _____ Does your horse bite? _____

Does your horse weave? _____ Does your horse rear/strike? _____

What kind of turn out does your horse require (number of hours, day, night)? _____

How does your horse behave when turned out with other horses? _____

Does your horse require private turn out? _____

Does your horse have any special medical needs? _____



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Does your horse have any allergies? _____
If so, what treatment is necessary? _____

Does your horse have any special dietary needs? _____

Has your horse ever required a twitch? _____
If so, how did he/she react? _____

Does your horse tie? _____ Stand on crossties? _____

How does your horse react to the following:

Farrier: _____

Vet: _____

Worming: _____

Injections: _____

Trailing: _____

Please give a brief summary of your horse's previous boarding history: _____

Please list any additional information you want us to know: _____

Date stall is requested: _____

Signature: _____ Date: _____