

VAN & SONS FARM

HORSE BOARDING APPLICATION

At Van & Sons Farm, we strive to maintain a safe, respectful, relaxing and enjoyable environment for all of our clients. Our intention with this application is to ensure that all of those goals are met, and we appreciate your time, consideration and understanding with this process.

OWNER INFORMATION:

PROSPECTIVE BOARDER NAME: _____

ADDRESS: _____

PHONE: _____

TELL US ABOUT YOU!

Riding Discipline(s) and Level of Training: _____

What are your main concerns regarding boarding facility amenities (example: availability of trails, protection from weather, indoor arena, availability of hot water for washing your horse) ? _____

Please rate your experience in the following areas (check most appropriate box):

	Very experienced/very comfortable?	Somewhat experienced/comfortable?	Not Experienced/uncomfortable?
Haltering/Leading horse?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grooming Horse?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Picking feet?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tacking/Untacking horse?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leading in and out of pasture/herd?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Loading/Unloading trailer?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Holding for vet/farrier/dentist?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Handling an irritable horse?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ABOUT YOUR HORSE:

- Horse Name(s): _____
- Horse Breed(s): _____
- Horse Age: _____
- Vices, unique habits or other pertinent information (please check all that apply):

<input type="checkbox"/> Cribbing	<input type="checkbox"/> Aggressive (how/when)?	
<input type="checkbox"/> Biting	<input type="checkbox"/> Weaving	<input type="checkbox"/> Wood Chewing
<input type="checkbox"/> Stall walking	<input type="checkbox"/> Rearing	<input type="checkbox"/> Kicking

- How is your horse within a herd environment? _____

- Does your horse have (or has recently had) any medical problems (check all that apply)?

<input type="checkbox"/> Colic	<input type="checkbox"/> Allergy (please explain):	
<input type="checkbox"/> Strangles	<input type="checkbox"/> Founder/Laminitis	<input type="checkbox"/> Other (please explain):

- Does your horse have any specific dietary needs? If so, please list (in detail): _____

REFERENCE/HISTORY:

By filling out this portion of the application, I realize that I may be giving permission to the vet/farrier/boarding facility to release any and all pertinent information regarding their experiences with myself and/or my horse(s) listed herein. I also recognize that I am giving permission to Van & Sons Farm to ensure the best care possible for your horse if it comes to our facility!

X _____

OWNER/PROSPECTIVE BOARDER SIGNATURE/DATE

VETERINARY REFERENCE:

- Name of Vet: _____
- Address: _____
- Phone Number: _____
- How many years have you utilized the services of this vet? _____
- Most recent service/Date? _____
- May we contact this reference? If no, please explain: _____

FARRIER REFERENCE:

- Name of Farrier: _____
- Address: _____
- Phone Number: _____
- # years you've utilized the services of this vet? _____
- Most recent service/date? _____
- May we contact this reference? If no, please explain: _____

BOARDING FACILITY REFERENCE (PLEASE LIST ALL, MOST RECENT FIRST):

- Facility Name: _____
- Contact Person (Manager, owner, etc): _____
- Address: _____
- Phone: _____
- # of years utilizing their service: _____
- May we contact this reference? If no, please explain: _____
- Reason for leaving: _____

- Facility Name: _____
- Contact Person (Manager, owner, etc): _____
- Address: _____
- Phone: _____
- # of years utilizing their service: _____
- May we contact this reference? If no, please explain: _____
- Reason for Leaving: _____

I certify that all information I have provided on this form is true and accurate to the best of my knowledge.

X _____
Name/Date