



Trinity Farm

of Northwest Florida

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EQUINE BOARDING AGREEMENT

1. Identification of Horse. Boarder's horse(s) to be housed by Farm ("Horse" or "Horses"):

a. _____ (registered or show name)

_____ (barn name)

_____ (breed)

_____ (sex)

_____ (age and color)

b. _____ (registered or show name)

_____ (barn name)

_____ (breed)

_____ (sex)

_____ (age and color)

2. Boarder's Contact Information.

(Name) _____, (Address) _____,

(City) _____, (State) _____, (Zip code) _____,

(Office phone) _____, (Cell phone) _____

(Home phone) _____, (Fax) _____,

(E-mail) _____, (Sex) _____, (Age) _____

(Level of experience with horses in general)

(Level of experience with This Horse)

3. Ownership of/Authority over Horse.

a. Boarder represents and warrants that they are the owner of record of Horse, or that they have express authority of the owner of record to enter into this Agreement and to house Horse with Farm. If Boarder is not the owner of record of Horse, Boarder nonetheless agrees to be fully bound by the terms of this agreement, and liable for all sums hereunder.

b. Identification of Owner of Record if Different Than Boarder.

If Boarder is not the owner of record of Horse, the owner of record is:

(Name) _____, (Street address) _____,

(City) _____, (State) _____,

(zip code) _____, (Office phone) _____

(Cell phone) _____, (Home phone) _____,

(E-mail) _____

4. Boarding Fee:

The Board payment of _____ is due on the 1st day of each month. Payment received after the 5th of the month will be subject to a \$ **35.00** late fee, plus \$ **5.00** in late fees for each additional day thereafter on which Board plus accrued late fees remain unpaid. There will be a **\$40.00** charge for returned checks. Payments shall first be credited to accrued late fees and returned-check charges.

5. Farm's Services:

- Farm agrees to provide a covered stall for Horse which will be kept clean and sanitary.
- Horse will be provided with turn-out time at owner's request. However, Farm will not guarantee any given time for turn out, but will try to meet your request.

I prefer that my horse is turned out:

_____ No turn-out _____ during the day

_____ 1-3 hours per day _____ at night

_____ 4-6 hours per day

_____ 7-9 hours per day

- Horse will be fed twice a day

I prefer that my horse is fed:

_____ Purina Healthy Edge

_____ Seminole Ultra Dynamix

- Farm will blanket Horse if the Boarder provides the blanket.
- Farm will worm the horses on a rotation.
- Access to all the amenities, which includes, but is not limited to: the arena, wash racks with hot and cold water, tack room, breakroom, lunge pen, satellite TV, mini jumps, WiFi, picnic areas, and the pond.
- Farm pays up to \$25.00 for regular trims by the farrier

6. Extra Expenses to be paid by Boarder:

- \$15.00 for Banamine shots (per 10cc) or \$1.50 (per cc)
- \$100 - \$150 for body clipping, depending on size of pony/horse (plus cost of drugs, if needed)
- \$20.00 for pulling a mane (plus cost of drugs, if needed)
- \$15.00 for clipping (ears, muzzle, legs) (plus cost of drugs, if needed)

- \$1.00 per mile for hauling
- Supplements (to be provided by Boarder)
- Likit refills – if your stall is equipped with the toy
- Lessons
- Training
- Washer and Dryer use (for polo wraps, towels, schooling and show pads and other horse related items ONLY) *See barn manager for laundry needs.*
- Veterinarian

7. Horse’s Physical Condition/Special Care.

Except as specified in this section, to Boarder’s knowledge, Horse is currently sound, disease-free, and in good condition, and not in need of any special care.

Exceptions: _____

8. Horse’s Behavior.

Boarder states that the Horse exhibits the following behavioral traits (For example, but not limited to: biting, kicking, weaving, cribbing, sucking) ****All cribbers must wear a cribbing collar provided by the Boarder.***

9. Hours of Visitation/Access to Horse.

Boarder, their veterinarian, farrier, trainer, and designated guests shall have access to Farm and Horse on the following schedule: **Farm hours are from 8 am to 7 pm, unless there are special events or circumstances.**

10. Veterinary Care.

a. Boarder agrees and understands that it is Boarder's responsibility to provide Horse with proper veterinary care and veterinary services. Boarder understands that if Boarder's horse is or appears sick or injured, Farm will first try to contact Boarder. If Boarder is unavailable, or Horse has an emergency, Boarder gives Farm permission to call Boarder's veterinarian,

identified as Dr. _____, with _____

(Clinic), at phone numbers (Office) _____,

(Cell) _____, (Home) _____,

and (E-mail) _____.

b. Boarder also agrees to keep Horse current on all customary vaccinations including, but not limited to, West Nile and EWT. Worming **will be provided** every two - three months by the farm.

____ I authorize Trinity Farm to administer Banamine when needed and I agree to pay for the shot administered.

____ Only a veterinarian can administer medications, even in the case of an emergency. I take full responsibility for my choice.

ALL HORSES MUST HAVE A CURRENT NEGATIVE COGGINS AT ALL TIMES

11. Farrier Care. Boarder agrees and understands that it is Boarder's responsibility to provide Horse with proper hoof care and farrier services.

_____ I would like to use the Farm farrier and I choose for this fee to be included in my board. (**This is regular trims ONLY. Shoes or special services are to be paid by owner at the time of service and is NOT included in the board fee.**)

_____ I will be responsible for the farrier services for my horse. This includes setting up a schedule and being there when my farrier arrives. I will receive \$25.00 credit in my boarding fees for farrier services. I will pay ALL of the costs associated with my farrier's services.

Boarder's farrier is: (Name) _____, (phone number) _____

_____ Boarder's farrier shall have access to Farm and Horse during Hours of Visitation. If Boarder's farrier is unavailable and Boarder's horse is in need of farrier services, Boarder authorizes Farm to call its farrier, and said Boarder will be fully responsible for all farrier charges so incurred.

12. Trainer. Boarder's trainer is: (Name) _____, at
phone numbers: (Cell) _____, (Home) _____,
and (E-mail) _____.

Boarder's trainer shall have access to Farm and Horse during Hours of Visitation. All training sessions will have to be cleared with the Farm trainer on staff to ensure that there aren't any time conflicts. **The Farm trainer has first right to the arena at all times.**

13. Prohibited Activities. (SEE LIST OF BARN RULES FOR A FULL LIST OF PROHIBITED ACTIVITIES)

Neither Boarder nor their guests or agents shall feed, turn-out, walk, work, ride, saddle, injure, whip, harass, or otherwise use or interact with any other horse at Farm without permission of Farm or that horse's owner.

WITH THIS BOARDING AGREEMENT AND LIST OF BARN RULES, YOU HAVE ALSO RECEIVED A LIABILITY RELEASE AGREEMENT. PLEASE MAKE SURE THAT YOU HAVE READ, SIGNED, INITIALED, AND FULLY UNDERSTAND THE LIABILITY RELEASE AGREEMENT. YOU MUST FILL OUT BOTH THE LIABILITY RELEASE AGREEMENT AND THE BOARDING AGREEMENT COMPLETELY AND RETURN IT TO THE BARN MANAGER. (You will receive copies.)

Every person that enters Trinity Farm with you, MUST have a liability release form completed and signed.

_____ **I HAVE RECEIVED, READ, UNDERSTAND, AND COMPLETED MY BOARDERS AGREEMENT.**

_____ **I HAVE RECEIVED, READ, AND UNDERSTAND THE BARN RULES.**

_____ **I HAVE RECEIVED, READ, UNDERSTAND, AND COMPLETED MY LIABILITY RELEASE AGREEMENT. I HAVE ALSO REQUESTED ADDITIONAL LIABILITY AGREEMENTS FOR ANYONE I PLAN TO BRING ONTO THE PROPERTY WHETHER THEY RIDE OR NOT. I ALSO ACKNOWLEDGE AND COMPREHEND THAT ONLY PEOPLE WHO HAVE SIGNED AND RETURNED THIS LIABILITY AGREEMENT ARE ALLOWED ON THIS FARM. IF FOR ANY REASON I BRING SOMEONE ON THIS PROPERTY WITHOUT A COMPLETED LIABILITY AGREEMENT, THEN I AM LIABLE FOR MY ACTIONS.**

BOARDER:

Signature: _____

Print Name: _____ Date: _____

Signature of Parent: _____ Date: _____

Signature of Parent: _____ Date: _____

Signature of Spouse: _____ Date: _____