



Agreement for Boarding an Adopted Horse with Others

Horses name:

Tattoo#

Breed:

Color:

Sex:

Age:

Markings:

Height:

Weight:

Owner's Name:

Date:

Address:

Phone:

City:

State:

Zip:

Owner/Boarding Stable Agreement

I _____ understand all board and related charges for the above horse must be paid to _____.

I also understand that if these charges are unpaid for two consecutive months, Omega Horse Rescue will pay the unpaid balance and will regain possession for this horse at which time I will relinquish all claims to the horse.

I also consent to any medical treatment deemed necessary in an emergency and Omega will be notified if the injury is life threatening.



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Stable phone:

Alternate Contact:

Stable Veterinarian:

Phone:

DIRECTIONS TO STABLING AREA:

The Monthly board will be \$ _____ payable on or before the _____ day of _____ the month.

Adopters Signature:

Date:

Stable Agents Signature:

Date:

Omega Signature:

Date:

Horse Arrived on: