

Hope's Dream Rescue and Sanctuary, CORP
465 San Mateo Rd. San Mateo FL 32187
Phone: (386)546-6890
Email: hopesdreamhorserescue@gmail.com

This agreement for good and valuable consideration receipt of which is hereby acknowledged dated October 15, 2025 , made by and between Hope's Rescue, hereinafter referred to as "STABLE" , providing services to _____ residing at _____, hereafter referred to as "OWNER."

These parties warrant that they have the right to enter into this AGREEMENT.

1. FEES, TERMS AND LOCATION

In consideration of \$500 per 2 horses per month paid by OWNER, STABLE agrees to board the herein described horse on a month to month basis commencing October 15, 2025 . The total amount can be split in two payments if OWNER prefers such as the 1st of each month and the 15th of each month. The payment can be made by the following methods:

PayPal-hopesdreamhorserescue@gmail.com Zelle-hopesdreamhorserescue@gmail.com.

Venmo-hopesdreamrescue.

CashApp-hopesdreamrescue.

Cash or checks. Checks returned for insufficient funds shall be charged a fee of \$25.

2. DESCRIPTION OF HORSE

Name _____ (Barn name and Show name)

Color _____

Breed _____

Registration/ Tattoo numbers (if applicable) _____

Value of Horse \$ _____

Insurance _____

Known Horse Allergies _____

3. FEED AND FACILITIES

STABLE agrees to provide the following in response to normal and reasonable care and handling of the horse:

Pasture board

Grain – Provided twice daily – OWNER provides grain of their choice.

Hay - Alfalfa hay to be provided by the STABLE

Horse shall have access to grass during summer and coastal hay rolls during fall and winter.

4. WORMING AND SHOTS

OWNER agrees that all OWNER'S horses are required to be up to date on Rabies, Tetanus, East/West Encephalitis, Intranasal Influenza, Rhinopneumonitis, West Nile, Strangles and a current Coggins. OWNER must furnish a copy of current Coggins and shot records prior to horse entering premises of STABLE. STABLE reserves the right to require additional immunizations at its sole discretion.

Additionally, if chosen for \$20 extra, STABLE shall automatically administer deworming medication on a rotational basis in accordance with the schedule as follows:

JAN/FEB – Oxibendazol

MAR/APR – Ivermectin

MAY/JUN – Pyrantel Pamoate

JUL/AUG – Oxibendazol

SEP/OCT – Ivermectin

NOV/DEC – Pyrantel Pamoate

5. VETERINARY CARE

Dr. Emily Pulliam is the designated veterinarian for STABLE. OWNER may utilize their own veterinarian if they choose. OWNER shall make all payment arrangements directly with the vet of their choice.

6. FARRIER

Raymon Smith, Clint Warwick are the designated farriers for STABLE. All horses are required to be trimmed and/or shod as needed on a regular basis. OWNER may designate their own farrier or use STABLE farrier if accepted. All payment arrangements are to be made directly with farrier. Farrier dates shall be coordinated with the STABLE.

7. EMERGENCY CARE

STABLE agrees to attempt to contact OWNER at the following emergency

number (____) _____ if STABLE feels that medical treatment is needed for said horse. In the event STABLE is unable to contact OWNER or his Trainer within a reasonable time, STABLE is then hereby authorized to secure emergency veterinary care and/or blacksmith care, by any providers of such care who are selected by STABLE, as STABLE determines is required for the health and well-being of said horse. OWNER agrees to pay up to \$100 for emergency care of their horse if they cannot be contacted. The determination of a "reasonable time" or "emergency" is at the sole discretion of STABLE. If possible, OWNER will be billed directly by service provider; however, if payment is required when services are rendered, STABLE will pay for care and will be reimbursed by OWNER within 15 days of notice thereof.

8. HOLD HARMLESS:

OWNER agrees to indemnify and hold harmless STABLE from any and all claims resulting from damage or injury caused by said horse, OWNER or his guests or invitees, to anyone, including but not limited to legal fees and or expenses incurred by STABLE in defense of such claims.

9. FLY CONTROL

STABLE will undertake reasonable steps to control the fly population at STABLE. This includes the use of fly predators, fly bait and/or feed supplements if OWNER provides.

Additionally, stalls will be cleaned once daily by STABLE, however, OWNER is encouraged to clean stall while on STABLE premises to assist in fly control and improve the horse's well being.

10. BLANKETING

Blanketing, defined as 1 blanket taken on and off in a 24 hour period, shall be done at OWNER's request for. OWNER is responsible for furnishing a suitable blanket for his horse, kept in usable condition. OWNER is further responsible for identifying which blankets are to be used during appropriate temperature ranges. Additionally, if horse removes blanket while on pasture on a regular basis, determined by STABLE, OWNER will be responsible for providing an alternate blanket or forfeit his blanketing service. STABLE is not responsible for lost, damaged or stolen blankets.

11. SADDLE RACK AND BRIDLE RACK

STABLE will furnish one area equipped with one saddle rack and one bridle rack per horse. Wet saddle pads/blankets will be stored on stall doors where there will be adequate ventilation to dry them. Lockers do have small ventilation holes but excessively wet items should not be stored for extended periods of time.

12. COMMON AREAS

OWNER is entitled to utilize the Tack room, Lounge, and Restroom as well as other common areas at the STABLE such as the Wash Stalls, Riding Ring and Trail. OWNER agrees to leave such areas in the same condition as he/she found them. This also pertains to OWNER'S

responsibility for cleaning up after his/ her horse in any common area of the barn. Horse feces and hair will not be washed down. There shall be no horses not currently under AGREEMENT using any of STABLE'S facilities, including trail, without written consent from STABLE.

13. TRAINERS

Trainers are allowed to provide services during normal business hours. If training is deemed abusive or inhumane by STABLE, trainer will not be allowed to return.

14. SUPPLEMENTS

STABLE will administer supplements twice a day to OWNER'S horse provided OWNER furnishes and marks said supplement. If more than one supplement is required, Smart Pak or similar supplement combination service must be utilized by OWNER.

15. MISCELLANEOUS

If there is any disruption of OWNER'S horse's routine, STABLE will notify OWNER. OWNER is responsible for making STABLE aware of any special circumstances or conditions requiring extra care or medication. STABLE is not responsible for administering extra care or medication, but may provide those services for an additional fee to be determined by STABLE. Stall Rest (staying in the stall 24 hours a day with no turn out) will cost an additional \$150 per month for the extra shavings, hay and cleaning required to accommodate that level of care. Any partial month of stall rest may be pro-rated.

16. TRAILERS

OWNERS may store their horse trailer at the STABLE provided permission is obtained from STABLE. There is no additional fee for storage of one horse trailer. The storage applies only to a horse trailer owned by the OWNER and is not transferable to a third party. OWNERS are responsible for making sure their trailer is parked in the designated location and placement does not interfere with the egress of any other trailer or vehicle. STABLE is not responsible for any theft, damage or missing items from trailer while stored at STABLE.

17. TERMINATION

Either party may terminate this AGREEMENT upon 30 days written notice to the other party. Should your horse die while at STABLE, STABLE will assist OWNER by removing deceased horse from barn or pasture. Transportation and disposal of the deceased horse is the responsibility of the OWNER and must be completed within 24 hours of horse's death. If horse is not disposed of within the required time, STABLE will arrange for the disposal of the horse at the OWNERS expense.

28. DEFAULT

STABLE may terminate this AGREEMENT for failure of the OWNER to meet any material terms of this agreement.

19. AMENDMENT

This AGREEMENT constitutes the entire agreement between the parties and may not be modified by either party without written amendment.

20. RIGHT OF LEIN

OWNER is put on notice that STABLE has and may assert and exercise a right of lien, as provided for by the laws of the State of Florida for any amount due for the board and keep of horse and also for any storage or other charges due hereunder, and further agrees STABLE shall have the right, without further process of law, to attach a lien to your horse after two (2) months of non-payment and STABLE can then sell horse and/or Tack to remove its loss.

WARNING!

Under Florida law, an equine activity sponsor or equine professional is not liable for any injury to or the death of a participant in equine activities resulting exclusively from the inherent risks of equine activities.

Executed at _____ on the date first set forth above.

“STABLE”

By: Hope's Dream Rescue and Sanctuary

Address: 465 San Mateo Rd. San Mateo FL, 32187

Telephone: (386) 546-6890

“OWNER”

By: _____

Address: _____

Phone: _____
