Southern Equine Services, PC

N. Scott Owen, DVM

Kristin Varga, DVM

2024 Board Contract

Description of Horse (Ple	ase inclu	de a copy of registratio	n papers)		
Name:		Bree	d:	Reg./Tattoo	#:
Date of Birth:	Sex:	Color:	Va	alue of Horse: \$	
Is horse insured? ☐ Yes	□ No	Type of Insurance:_			
Policy # :		Insurance Agency & C	ontact # :		
For pregnant mares, all t	erms and	d conditions of this con	tract apply to the fo	al in utero and	after birth.
If the horse boarding is a	mare an	nd she has a foal by her	side – Name of Foal	i:	
Date of Birth:	Sex:	Color:	Va	alue of Foal: \$	
Is foal insured? ☐ Yes ☐	□ No	Type of Insurance:			
Policy # :		Insurance Agency & C	ontact # :		
The standard diet is Purir	a Impac	t Professional Performo	ance Pellets and Gra	ss and/or Alfalf	a hay.
Grain Amount and Freque	encv:				•
Hay Type: □ Alfalfa					times per day
Supplements or Special Ir					
Is the horse currently on					
Please check type of board Paddock-\$22/day Reason for boarding: Turn out for stall board IF	S tall-\$25 Breeding	/day □ Foaling/Nursi	ing Mares, Stallions, rding Only □ Med	or Hospitalizat	ion (Stall)-\$30/day
Health Records (Please p	rovide la	st dates for the followi	ing)		
Coggins Test:		Deworming date/	oroduct:		
Vaccinations: EWT					
Please check box if horse	is due fo	r: 🗆 Vaccinations 🛭	☐ Deworming ☐ C	oggins Test	
☐ Please check box to re	equest a	routine dental float wh	nile your horse boar	ds at SES	
Please list any medical co	nditions	that could affect mana	gement of the horse	:	
Farrier: Trim Fro Any horse that does not so the second so the second secon	tand quie Special Ir of our c	nstructions:hoosing for any needed	eing will be administ	ess Owner make	·
Office Use Only: Items left		 2:			

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This agreement is made by and between the Horse Owner (Owner) and Southern Equine Services (SES) and is subject to the laws of the state of Alabama.

Boarding Fees/Terms

All outstanding charges must be paid in full before removing any horse from SES premises. All care charges incurred including, but not limited to, veterinary services, farrier services, special dietary services, as well as board expenses are due at time of service. SES has the right to maintain possession of the horse until all fees have been paid in full. SES reserves the right to request a deposit for services to be rendered.

Refunds and Right to Refuse Services

No refunds will be given for services rendered regardless of outcome. SES reserves the right to refuse service at any time with notification to Owner.

Ownership

Owner warrants that he/she owns said horse and that there are no liens against said horse, expressed or implied by law. If said horse is registered or eligible for registration, a copy of the registration papers (or sire and dam information if not yet registered) for each horse must be provided to SES upon arrival.

Basic Health Maintenance

Proof of current vaccinations (Eastern and Western Equine Encephalomyelitis, Tetanus, West Nile, Rhinopneumonitis, Influenza, and Rabies), deworming, and a negative Coggins test (within the past twelve months) must be provided to SES at time of delivery. If this is not provided, a new Coggins test will be drawn and the horse will be vaccinated and dewormed at Owner's expense. During the term of this contract, Owner grants SES the right and authority to administer medications and to have the horse trimmed or shod at any time by a farrier selected by SES (unless Owner has informed SES of a specific farrier he/she would like to use and that farrier is available) at Owner's expense.

Emergency Care

SES agrees to attempt to contact Owner and Emergency secondary contact at the phone number(s) provided if SES feels that medical treatment is needed for said horse. In the event that SES is unable to contact Owner or Emergency contact within a reasonable time, SES is then hereby authorized to provide emergency veterinary and/or farrier care. The cost of such care shall be due and payable by Owner with the following month's board (or before said horse leaves SES premises).

Assignment/Risk of Loss

Owner may not assign this agreement without the express written consent of SES. During the time that the horse is in the custody of SES, SES shall not be liable for any sickness, disease, theft, death, or injury which may be suffered by the horse, or any other cause of action whatsoever arising out of or connected in any way with the treatment or boarding of the horse. This includes, but is not limited to, any personal injury or disability the horse may receive while on SES's premises. Owner fully understands and hereby acknowledges that SES does not carry any insurance on any horse not owned by SES. Owner agrees that all risks relating to boarding and care of the horse while the horse is in custody of SES, will be borne by Owner. Owner agrees to disclose this entire agreement to Owner's insurance company and to provide SES with the insurance company's contact information and policy number(s) associated with each horse. Failure to disclose insurance information shall be at Owner's risk.

Hold Harmless

Care will be taken for horse(s) presented to SES, to prevent accident, sickness, injury, or death. Owner will not hold SES, its owners, employees, the stallion owner, or any of the employees responsible if any such occurrences should arise. SES, its owners, employees, veterinarians, and guests shall not be held liable for any injury, escape, disability, or death of any horse on its premises whether from fire, flood, theft, or any other reason. Owner and Owner's respective agents, employees, representatives, assigns, affiliated persons, and/or others acting on their behalf agree to hold harmless and release SES and their respective agents, employees, representatives, assigns, affiliated persons, and/or others acting on their behalf from liability for ordinary negligence related to any and all injuries, damages, personal property damages or losses that owner may sustain arising out of being on the premises of SES unless such injury, damage, or loss was intentional or in reckless disregard for safety. Owner and Owner's respective agents, employees, representatives, assigns, affiliated persons, and/or others acting on their behalf agree to adhere to the provisions of the Alabama State Law regarding liability risk inherent to equine activities.

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Right of Lien for Non-payment of Charges

Statements will be mailed or emailed monthly for services provided. Statements are due and payable upon receipt. SES accepts Visa, MasterCard, American Express, and Discover as well as cash and personal checks. After 30 days from billing date, a 3% monthly service charge will be assessed on the outstanding balance. All outstanding charges are due in full prior to removing horse(s) from SES premises. Owner agrees that SES has and may assert and exercise a right of lien, as provided for by the laws of the State of Alabama, for all fees, charges, and expenses that are incurred while the horse is under the care of SES. Owner further agrees that SES shall have the right, without process of law, to attach a lien to said horse after two (2) months of non-payment and SES can then sell the horse to recover its loss. Owner agrees to pay all collection and attorney/court fees incurred by SES in attempting to collect any outstanding balance.

All charges must be paid in full BEFORE the release of any horse. Two days' notice may be required before the release of the horse in order to ensure the proper paperwork is prepared. Owner is required to make all shipping arrangements to leave or enter SES between the hours of 9 AM and 4 PM Monday through Friday, unless previous arrangements have been made well in advance. An additional fee of \$100 may apply for shipping arrangements scheduled outside of regular hours.

Credit/Debit Card To Be Held for Services

☐ PLEASE CHECK BOX TO AUTHORIZE CARD USE	FOR ALL INCURRED CHA	RGES		
I attest that I am fully authorized to allow charges or SES for the above listed horse. The credit/debit card services rendered to the above horse for the entiret	d below is authorized to be	e held by SES and will be charged for all		
Card Holder Name (as shown on card):				
Billing Address (if different from Owner):				
 Card #:		Security Code:		
Authorized Signature:	Printed Name:			
Owner Name:	Driver's License # and State:			
Home Phone:	Cell Phone:			
Billing Options: Mail Email Email: Billing Address:				
Preferred contact method: Phone call T				
In case of an emergency, secondary contact that c	an authorize veterinary n	nedical or surgical treatment.		
Name:	Phone #:			
The undersigned represents to SES that he/she is the contract, and is responsible for all terms and condition				
Signature of Horse Owner:		Date:		