

# Heartland Ranch USA

7003 Mcnutt Rd, Anthony, NM 88021 [www.heartlandranchusa.com](http://www.heartlandranchusa.com) 915-455-1948

## Horse Boarding Application

### 1. Boarder Information

Name: \_\_\_\_\_

Home address: \_\_\_\_\_

Home phone: ( ) \_\_\_\_\_ Work phone: ( ) \_\_\_\_\_

Cell phone: ( ) \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Employer: \_\_\_\_\_

Work address: \_\_\_\_\_

### 2. Horse to Be Boarded

(Additional horses may be listed on Attachment A)

Name of your horse: \_\_\_\_\_

Sex of your horse: \_\_\_\_\_

If your horse is a mare, is she in foal? Yes:  No:

If yes, please specify approximate foaling date: \_\_\_\_\_

Do you expect that your mare will deliver her foal at this facility? Yes:  No:

Color and markings: \_\_\_\_\_

Year foaled: \_\_\_\_\_

Breed, breed registry and reg. #: \_\_\_\_\_

Tattoos, brands or other identifying marks: \_\_\_\_\_

Does your horse have any history of colic or other medical problems? Yes:  No:

If yes, please explain: \_\_\_\_\_

Are you the sole owner of your horse? Yes:  No:

If not, please explain: \_\_\_\_\_

Does horse have any history of behavioral issues? (e.g., biting, kicking, bucking, rearing, pulling back when tied) Yes:  No:

If yes, please explain: \_\_\_\_\_

Does your horse crib, chew wood, windsuck, weave or have any other habits? Yes:  No:

If yes, please explain: \_\_\_\_\_

Does your horse have a history of escaping from stalls, paddocks, pastures or other enclosures? Yes:  No:

If yes, please explain: \_\_\_\_\_

What else should we know about your horse? (e.g., allergies, fears, herd behavior, special dietary needs) \_\_\_\_\_  
\_\_\_\_\_

What does your horse currently eat (type and amount) each day?  
\_\_\_\_\_

### 3. Current Boarding facility

Name of facility: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: ( ) \_\_\_\_\_

Can we contact this facility for a reference? Yes:  No:

Why are you leaving this facility? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### 4. Veterinarian

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Work phone: ( ) \_\_\_\_\_ Cell phone: ( ) \_\_\_\_\_

Can we contact your vet for a reference and to request a copy of your horses' shot records? Yes:  No:

### 5. Farrier

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Work phone: ( ) \_\_\_\_\_ Cell phone: ( ) \_\_\_\_\_

Can we contact your farrier for a reference? Yes:  No:

### 6. Trainer or Instructor (if applicable)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Work phone: ( ) \_\_\_\_\_ Cell phone: ( ) \_\_\_\_\_

Can we contact your trainer or instructor for a reference? \_\_\_\_\_

Do you plan to have your trainer or instructor come to this facility? Yes:  No:

Boarder Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Name of your horse: \_\_\_\_\_

Sex of your horse: \_\_\_\_\_

If your horse is a mare, is she in foal? \_\_\_\_\_

If yes, please specify approximate foaling date: \_\_\_\_\_

Do you expect that your mare will deliver her foal at this facility? Yes:  No:

Color and markings: \_\_\_\_\_

Year foaled: \_\_\_\_\_

Breed, breed registry and reg. #: \_\_\_\_\_

Tattoos, brands or other identifying marks: \_\_\_\_\_

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If yes, please explain: \_\_\_\_\_

Are you the sole owner of your horse? Yes:  No:

If not, please explain: \_\_\_\_\_

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If yes, please explain: \_\_\_\_\_

Does your horse crib, chew wood, windsuck, weave or have any other habits? Yes:  No:

If yes, please explain: \_\_\_\_\_

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If yes, please explain: \_\_\_\_\_

What else should we know about your horse? (e.g., allergies, fears, herd behavior, special dietary needs) \_\_\_\_\_

What does your horse currently eat (type and amount) each day?