



Please, fill in the following information regarding yourself and your horse before signing the Boarding Agreement.

I would like (circle one):

Weekly Training Board Monthly Training Board Regular Full Care Board

Pasture Board

(See current rates on WOFRS attached copy)

Name of Owner: _____

Address: _____

Phone Numbers:

Home _____ Work _____ Cell _____

Name of Horse : _____ Barn Name _____

Breed: _____ M ___ G ___ S ___ Age: _____

Date of current Coggins : _____

WOFRS needs a copy of current negative Coggins before horse is unloaded. It must be current within a year for NC or within six months for out of state horses. Must have a Health Certificate for horses arriving from out of state dated within 10 days.

Date of last deworming: _____

Brand of dewormer: _____

Current Vaccination Record: Please leave copy with WOFRS

Name and Phone Number of veterinarian: _____



Name and Phone Number of farrier: _____



BOARDING AND HOLD HARMLESS AGREEMENT

Pursuant to this agreement entered into by and between Patty and Vanessa Moreland, Lessors, and _____, Lessee on this day, _____.

Lessors and Lessee agree to the boarding of _____ (Name of Horse) on Lessor's property, Willow Oak Farm Riding School (WOFRS). Lessee agrees to use the premises upon the following terms:

1. First and foremost, Lessee agrees to hold Lessor harmless for any and all physical injuries to Lessee, her invitees and licensees and to their personal property while on the premises of **Lessor and agrees that Lessee and any guests of Lessee ride at their own risk;**
2. Lessee agrees to pay Lessor in advance on the _____ day of each and every month that the horse resides on the premises the sum of _____ for each horse so residing which sum includes Training Board*. If weekly board, Lessee agrees to pay Lessor upon arrival of horse for the week, the sum of _____.
3. Lessee agrees to be on WOFRS feeding program and if not, Lessee agrees to provide her/his horse's feed at Lessee's own expenses such expenses will not be deducted from the board. Lessee agrees to pay extra fees for alfalfa hay as stated by Lessor.
4. It is further understood that Lessor agrees that Lessee may have reasonable use of the clubhouse, tack room, fields for trail riding (designated by WOFRS), riding ring and covered arena on premises, wash stall and a shed if applicable designated for his/her use – which field may be changed from time to time by Lessor as use-needs dictate.
5. Lessee understands that if Lessee does not own a trailer WOFRS is not responsible for the hauling of Lessee's horse and that Lessee has to make her/his own arrangements for trailering her/his horse.
6. That Lessee agrees to replace at Lessee's own expense any items or structures which may be damaged by Lessee and/or Lessee's animals whether such harm is inadvertent or not.



7. That Lessee gives a 30 day notice prior to moving her/his horse from WOF premises as part of this contract signed by Lessee and Lessors and if Lessee moves the horse before the 30 day notice, Lessee agrees to pay the full amount on the boarding agreement for that horse.
8. That Lessee has read and accepts WOFRS rules and regulations as they are.

That Lessor acknowledges that she/he has read CHAPTER 99E of the North Carolina General Statutes in connection with equine activities which further holds Lessor harmless for any injuries sustained while on Lessor's property, and agrees to be bound so; **WARNING: UNDER NORTH CAROLINA LAW, AN EQUINE SPONSOR OR EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING EXCLUSIVELY FROM THE INHERENT RISKS OF EQUINE ACTIVITIES. CHAPTER 99E ON THE NORTH CAROLINA GENERAL STATUTES.**

*WOFRS Training Board includes full care and training of the horse boarded on premises as such :

Full Care :

1. **Feeding schedule** : grain, hay, electrolytes are provided daily at regular WOFRS times of feeding. Grain is provided twice a day and hay is provided free choice.
2. **De-Worming schedule** : 3 to 4 times per year paste dewormers as dictated by WOFRS - Owners need to have a fecal drawn twice a year (spring and fall) by a licensed veterinarian at owner's expense.
3. **Bedding** : horse is provided with clean stall with shavings and/or clean shed.

Training Program :

Horses are ridden 3 to 5 times per week depending on the age and the work level of the horse. The training program includes ground work and desensitization, conditioning, dressage and jumping at the discretion of the owner. Owner of the horse and WOFRS together discuss a training schedule which can be reviewed anytime. In addition to WOFRS riding Owner's horse, Owner is entitled to 2 to 3 lessons per week. If Lessee attends summer camps, camp fees shall apply and are not part of any boarding rates.

Willow Oak Farm

Riding School



3231 Mays Chapel Road
Sanford, NC 27330
919.548.0762

Owner is responsible for all veterinary and farrier expenses. Owner has to have his/her own tack and be responsible for its care. WOFRS does not provide for flyspray, leather conditioner or/and shampoos and grooming equipment other than what is already agreed in this contract.



Will your horse be on WOFRS feeding program or will you provide his/her feed ?
If yes, Please give details _____

Can your horse be turned out to pasture alone ? _____

Any turn-out restriction? _____

Give any information about your horse such as : Cribbing, nervousness, weaving,
kicking, biting, prone to ulcers and colic, any allergy you may know (to rain, flies, hay,
shavings, dust, grasses....).

Has your horse ever had laminitis

Does your horse need corrective shoeing ? Does your horse wear hind shoes ?

Please mention anything else that may help WOFRS to give the best possible care and
training to your horse

**I AGREE TO BOARD MY HORSE AND ACCEPT WOFRS RULES AND
REGULATIONS IN ORDER TO RIDE IN A SAFE ENVIRONMENT. I
ACCEPT WOFRS MANAGEMENT OF CARE, DEWORMING AND**

6



FEEDING PROGRAM AND AGREE TO PAY ALL FEES AS NOTED IN THIS CONTRACT.

I AUTHORIZE WOFRS TO CALL A LICENCED VERTINARIAN IN CASE OF AN EMERGENCY IN CASE I CANNOT BE REACHED AND AUTHORIZE EMERGENCY CARE OF MY HORSE AND AGREE TO PAY ALL EXPENSES, RELEASING WOFRS OF SUCH EXPENSES.

Signed: _____ (Owner of horse/Lessee) Date: _____

Signed: _____ (Patty Moreland/Lessor) Date: _____

Signed : _____ (Vanessa Moreland/Lessor) Date: _____