

POOLE TRAINING CENTER --- SIGN IN FORM

Horse's Name _____

(closed on Sundays)

Owners Name:		
Address:		
City:	State:	Zip:
<i>Please include all phone numbers needed to reach you in an emergency.</i>		
Home Ph:	Work Ph:	Fax:
Mobile Ph:	Email:	
Arrival Date:	Expected Departure Date:	
Sex:	Breed:	Age:
Color/Markings:		
Is Horse Insured?	Yes / No	Company Name:
Policy #	Insurance Phone:	
Do you want your horse insured? Yes / No		
Coggins Test	Orig ***	Yes / No
Date:		
***Owner must provide a current original coggins with your horse upon arrival. If we do not receive this coggins, we will pull a new one 7 days after arrival at your expense.		
Inoculations & dates given:		
Date of last worming and product used:		
Equipment arriving with horse:		
What kind of training do you want put on your horse? (If you need further space, please use the reverse side)		
Special Notes or Instructions:		

(Your horse will be worked for you by appointment only. With our busy schedule it is best if you schedule at least 24 hours prior and preferable several days prior to get a good time for yourself.)

Warning

Under South Carolina law, any equine activity sponsor or equine professional is not liable for an injury to or the death of a participant in an equine activity resulting from an inherent risk of equine activity, pursuant of Article 7, Chapter 9 of title 47, code of Laws of South Carolina, 1976.

I, _____, understand that all board and training fees are due in advance of service and agree to pay all bills (including medical or footwork) incurred by above stated horse by the due date or pay 1.5% late fee on the balance owed. If full payment is not received within 25 days of due date, you must remove your horse from Poole Training Center. Your bill must be paid in full prior to removing your horse from the premises. I also understand that Poole Training Center or its employees are not liable for injury, sickness or death to the above horse. Poole Training Center agrees to give normal reasonable care to your horse while at Poole Training Center.

Signature

Date