



BOARDING APPLICATION

Flying M Stables & Farm LLC

3922 113th Ave SW
Olympia, WA 98512
253-820-3533

***Please fill out one application per horse

Date of Application: _____

Please answer all questions as completely and accurately as possible.

Applicant name: _____

Address of Applicant: _____

Home Phone #: _____ Work #: _____

Cell #: _____ E-mail: _____

Preferred method of communication? _____

Are you the rightful owner(s) of the horse you intend to board? _____

If not, provide Owner's name and phone number:

- *If the horse is leased, or on payment terms, a copy of the contract must be turned in with this application.*

Horse's name: _____

Gender of horse: _____ Color: _____ Age: _____

Height/Weight: _____ Breed: _____

Distinguishing markings: _____

Are you looking for short-term or long-term boarding? _____

Are you interested in full-care or partial-care boarding? _____

Please list name and age of any minors who will be visiting premises:

All minors under 16 years of age must have adult supervision while on property. Minors 16 and older must have permission in writing to be on the property without supervision.

Please describe your experience with horses and length of time that you have been involved with horses:

Length of time you have owned/leased this horse: _____

- *If the horse has been acquired within the last year, previous owner's contact information must be attached to this application.*

Where is your horse being kept currently (field/stall,etc.) _____

Reason for leaving prior boarding facility: _____

Is the horse current on vaccinations?: _____ Can you provide proof of

vaccinations?: _____

Name and phone number of Veterinarian: _____

Please list any current health problems your horse has that requires special attention:

Was your horse seen by the vet/farrier/dentist/chiropractor in the last year for anything other than routine care and if so please describe:

Is your horse on a regular schedule with a farrier? _____ Frequency: _____

Name and number of farrier: _____

Please list 1 personal equine related reference, including phone number:

Please list the last facility in which your horse was boarded, and phone number and/or e-mail address of facility:

Dates to and from your horse was boarded at above facility: _____

Please list the approximate hours per week you/family member/friend spends with the horse and type of activities you usually participate in:

Vices:

	Yes	No
Cribs	()	()
Chews wood	()	()
Stall Pacer	()	()
Kicks stall walls	()	()
Paws/digs	()	()
Paddock pacer	()	()
Needs chain/shank	()	()
Bites	()	()
Kicks	()	()
Bad ground manners	()	()

If you answered "yes" to any of the above, please provide a more thorough description of your horse's behavior regarding this vice, and/or please add and explain any other vices.

Does your horse exhibit any potentially dangerous behavior such as spinning, kicking, rearing, biting, excessive spooking, nervousness? _____ Please explain: _____

Has this horse ever injured a person or another horse? _____ If yes, explain:

Is your horse dominant or submissive in a field with other horses? _____

In the case of an emergency, when you could not be reached would you allow decisions to be made for your horses' care? _____

Remarks about previous question:

Has your horse had colic? _____ If so, how many times and explain measures taken:

How did you hear about Flying M Stables? _____

Please tell us anything else about your horse and yourself that you would like to express:

There will be a required contact to be signed by horse owner prior to boarding at Flying M Stables. We do offer extra services, with extra fees, such as blanketing horses. You are required to keep up with normal care, such as: worming, hoof care, vaccinations, etc.

I, the undersigned, grant the staff of Flying M Stables, the authority to contact the references/vet/farrier/last boarding facility that I have listed on this application. I understand that the information provided in this application will not be released to any outside person or entities unless required by law.

I further understand this is not the board agreement, but an application. No fees are to be exchanged with this application. By signing, I hereby attest that the information provided in this application (4 pages) is accurate to the best of my knowledge.

Applicant's signature

Date

***All applications are considered on first come, first served basis. If you are not approved for boarding, you will receive notice in writing, stating why your horses(s) were not accepted at this time. We reserve the right to refuse service to anyone.

Please mail application to barn owner: Sarah Mills, 3922 113th Ave SW, Olympia, WA 98512 or drop it off at Flying M Stables, place in payment slot. Direct any questions to Sarah at 253-820-3533, or sarah@flyingmstables.com.