Hossmoor Boarding Application

Name:				Date:	
Address:				CA	
Contact numbers: Ho					
	ll:				
Name of Horse:			Breed:		
Age: Sex: Color					
Name of Horse:			Breed:		 -
Age: Sex: Color	: Weight	HH	Vices: ₋		
Name of Horse:			Breed:		· · · · · · · · · · · · · · · · · · ·
Age: Sex: Color	: Weight	HH	Vices: _		
Name of Horse: Color:			Breed:		· · · · · · · · · · · · · · · · · · ·
Age: Sex: Color	: Weight	HH	Vices: ₋		
Trainer (If applicable): Name				Phone	
Farrier: Name			ie		
Vet: Name			e		
Current Boarding:					
Prior Boarding:					
Boarding Type Desired:					
Wait Listing:			(note the barn if the one you want is full)		
Signature					

By signing this application, you are giving Hossmoor permission to contact the above references. A non-refundable \$100.00 deposit must accompany your application. This ensures you a place on our waiting list. When a place for your horse becomes available, you will be notified. Your deposit will be applied to your last month's board. Vaccinations and worming must be current when your horse arrives. We are looking forward to serving you and your horse's needs.

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