



Horse Information Sheet

Contact Information

Owner's Name:

Work Phone:

Address:

Cell Phone:

Email Address:

Preferred Method of Communication:

Home Phone:

Horse's Information

Horse Name:

Years Owned:

Gender:

Breed:

Registration Organization:

Age:

Registration Brand/Number:

Equine Insurance Company:

Microchip Number:

Policy Number:

Vices:

Has this horse ever injured a person or another horse?

If yes, please explain

Current Veterinarian

Name:

Email Address:

Practice Name:

Cell Phone:

Address:

Work Phone:

Horse: _____

Owner: _____

Date: _____

New/Sold Horse Paperwork Checklist

- Make copies and file all paperwork. Place in appropriate books.
- Signed Boarding contract
- Signed waiver
- Coggins Date: _____
- PPE Report (for purchased/sold horses only)
- Vaccinations
 - Flu/Rhino Date: _____ (within 6 months) Serial # _____
 - Tetanus Date: _____
 - West Nile Date: _____
 - EEE/WEE Date: _____
 - Rabies Date: _____
 - Potomac Horse Fever Date: _____
 - Botulism Date: _____
 - Strangles Date: _____
 - Other
- Last Shoeing Date: _____
 - Hold
 - Crosstie
- Registration Papers (if applicable)
- Deworming Date: _____ Class of wormer: _____
- Teeth Date: _____
- Known Allergies: _____
- Medications

- Feed Schedule
 - AM

 - PM