

# SHADY HOLLOW ASSISTED RIDING SELF CARE BOARDING AGREEMENT 2011



Phone: 610-582-4050 or 610-858-7937  
Email: michele@hugahorse.com  
www.hugahorse.com

959 E Main St  
Birdsboro, Pa 19508

**Name of Owner:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Cell:** \_\_\_\_\_ **Home:** \_\_\_\_\_

**E-Mail:** \_\_\_\_\_

**Description of Horse(s):** \_\_\_\_\_

Name: \_\_\_\_\_

Age: \_\_\_\_\_

Color: \_\_\_\_\_

Registration/Tattoo: \_\_\_\_\_

Sex: \_\_\_\_\_

Breed: \_\_\_\_\_

Number *(if applicable)*: \_\_\_\_\_

Insurance Carrier, Policy and phone number *(if applicable)*: \_\_\_\_\_

\_\_\_\_\_

**Veterinarian's Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Farrier's Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

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## **Self Care Boarding Description:**

Shady Hollow Farm agrees to have said owner \_\_\_\_\_, provide daily care to said horse(s), \_\_\_\_\_. Daily care is to include; grain fed twice daily, hay 3 times daily, turn out to paddock or pasture (weather permitting), stalls cleaned and bedded and fresh water. Worming is required 4 times yearly as well as teeth floated once a year. In return Shady Hollow Farm will provide use of stall(s), properly managed barn, tack room, indoor/outdoor arena, and trail system.

## **Boarding Fees and Terms:**

In consideration of \$ \_\_\_\_\_ per horse per month paid by OWNER in advance on the First day of each month, Shady Hollow Farm agrees to board the herein described horse (s) on a month to month basis commencing \_\_\_\_\_, 2011. Partial months boarding shall be paid on a pro-rata basis based on the numbers of days boarded in a standard 30 day month.

Late Fees: Boarding fees paid between the sixth and fifteenth day of the current month due will be subject to a late fee of \$15.00. Fees received after the sixteenth will be subject to a late fee of \$25.00.

## **Following Information must be provided before boarding begins:**

1) Proof of vaccinations: Upon arrival of horse(s) to Shady Hollow Farm proof of current tetanus, sleeping sickness, and Influenza vaccinations is required. Proof of Tetanus and sleeping sickness vaccines are required once yearly and influenza twice yearly. A negative current Coggins test is required for all horses arriving from out of state.

2) Signed Shady Hollow Farm Registration and Liability Release Form.

## **Shady Hollow Farm Shall be Held Harmless**

OWNER agrees to hold Shady Hollow Farm harmless from any claim resulting from damage or injury caused by said horse, OWNER or his guests and invitees, to anyone, including but not limited to legal fees and/or expenses incurred by Shady Hollow Farm in defense of such claims.

## **Emergency Care**

Shady Hollow Farm agrees to attempt to contact OWNER, at the following emergency telephone number (\_\_\_\_\_), should Shady Hollow Farm feel that medical treatment is needed for said horse (s), provided however, that in the event the Shady Hollow Farm is unable to so contact OWNER within a reasonable time, which time shall be judged and determined solely by Shady Hollow Farm, Shady Hollow Farm is then hereby authorized to secure emergency veterinary care and/or blacksmith care, and by any licensed providers of such care who are selected by Shady Hollow Farm, as Shady Hollow Farm determines is required for the health and well-being of said horse (s). The cost of such care secured shall be due and payable by OWNER within fifteen days from the date OWNER receives notice thereof, provided however, that Shady Hollow Farm is authorized to arrange direct billing by said care provider to the OWNER.

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**Default:**

Either party may terminate this AGREEMENT for failure of the other party to meet any material terms of this AGREEMENT. In the case of a default by one party, the other party shall have the right to recover legal fees and expenses, if any, incurred as a result of said default. Any payment due Shady Hollow Farm under this AGREEMENT shall be due and payable by the tenth day of the month and immediately in the event of termination. Failure to make any payment by said due date shall place OWNER in default hereunder. Acceptance by Shady Hollow Farm of any late payment shall not constitute a waiver of subsequent due dates or determinations of default.

**Assignment:**

This AGREEMENT may not be assigned by OWNER without the express written consent of Shady Hollow Farm.

**Notice of Termination:**

OWNER agrees that thirty (30) days notice shall be given to Shady Hollow Farm as to the termination of this AGREEMENT.

**Right of Lien:**

OWNER is put on notice that Shady Hollow Farm has and may assert and exercise a right of lien, as provided for by the laws of the State of Pennsylvania for any amount due for the board and keep of horse (s), and also for any storage or other charges due hereunder, and further agrees Shady Hollow Farm shall have the right, without process of law, to attach a lien to your horse (s) after two (2) months of non-payment or partial payment and Shady Hollow Farm can then sell horse (s) to recover its loss.

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_