



## Admission Form

Date: \_\_\_\_\_ HORSE: \_\_\_\_\_

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

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

Markings/Brand: \_\_\_\_\_

OWNER(S):

\_\_\_\_\_  
\_\_\_\_\_

Home phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

\_\_\_\_\_  
Authorized

rized Handlers/Visitors: \_\_\_\_\_

\_\_\_\_\_  
Authorized Health Care Decision-Makers: \_\_\_\_\_

\_\_\_\_\_

Vaccination History - Provide Dates:

\_\_\_\_\_EEE/WEE \_\_\_\_\_Tetanus \_\_\_\_\_Rabies

\_\_\_\_\_West Nile Virus \_\_\_\_\_Flu/Rhino \_\_\_\_\_Strangles

\_\_\_\_\_Other:



Veterinarian's Name & Contact Information

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Worming History - Date: \_\_\_\_\_ Brand: \_\_\_\_\_

Farrier History - Date: \_\_\_\_\_ Full Shoe    Half Shoe    Trim Farrier's  
name and number: \_\_\_\_\_

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Dental History - Date last floated \_\_\_\_\_ Dentist's  
Name & Number - \_\_\_\_\_

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Current medications - if refills needed, specify source and whether COE or owner will  
refill: \_\_\_\_\_

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IS YOUR HORSE CURRENTLY IN TRAINING? \_\_\_\_\_

Name of trainer \_\_\_\_\_

How would you like your trainer kept informed of progress? \_\_\_\_\_

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INSTRUCTIONS FOR FEED AND SUPPLEMENTS:

Hay Type and Number of Flakes -

Alfalfa/Grass     Alfalfa/Grass     Alfalfa/Grass

Orchard Grass     Orchard Grass     Orchard Grass

AM \_\_\_\_\_ Noon \_\_\_\_\_ PM \_\_\_\_\_

Grain (additional charges will apply)

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Platinum Supplements (additional charges will apply)

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Owner Supplied Supplements - Please include type and amount:

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KNOWN BEHAVIORAL OR HEALTH PROBLEMS:

History of:  Biting?     Kicking?     Pulling Back?     Claustrophobia

Can the horse be tied? \_\_\_\_\_

History of:  Colic?     Allergies?     Founder?     Unsoundness

Other? \_\_\_\_\_

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Has your horse had within the last 14 days:  Fever     Snotty Nose



Cough

Has your horse within the last 30 days been exposed to other horses with infectious disease?  Yes  No

If YES: When, where, what: \_\_\_\_\_  
\_\_\_\_\_

#### TACK AND EQUIPMENT

Blanket: (color, marking) \_\_\_\_\_

Halter: (color, marking) \_\_\_\_\_

Other tack or equipment: \_\_\_\_\_

Additional Instructions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed:

\_\_\_\_\_

Horse owner

Date: \_\_\_\_\_