

## **Living Wells Farm**

282 Allen Road Wells, ME 04090 (207) 676-1029

Owners: Amanda & Bob Hoffman Cat & Chris Curley

## **Boarding Application**

Horse's Name:		
Owner's Name:		
Address:		
Home Phone No #:		
Cell Phone #:		
Business Phone #:		
Email Address:		
REQUESTED DATE OF AF	RRIVAL:	
Description of Horse:		
Name:	DOB:	Sex:
Color:	Breed:	
Reg No#:	Height:	
Brands:	Locations:	

PAST	JRE:		
	Horse has been in a grass pastu	are at the present	time
	Horse has not been in a grass p	asture recently	
	Last date horse was in a grass	pasture	
	Horse has never been on grass		
Please	e check preferences:		
1. Stal	l:		
	11X12 matted stall	starting at \$375.00	0.00/month
	11X12 matted stall with Dutch door	starting at \$425.00	0/month
	12X 22 matted stall:	starting at \$475.00	0/month
	12X22 matted stall with Dutch door:	starting at \$525.00	0/month
Noto:			
Note			
2. Tacl	k Room:		
	Unheated tack room: included in fu	ll board	
	Heated tack room: \$25.00/month		
Note:			
3. Sha	vings: (stalls are cleaned daily)		
	_ Stall mat is covered with shaving	s except in	(included in full
board)	feed corner. Soiled shavings and daily and clean shavings are add to the stall		
	_ Additional shavings required. Number of additional bags per w	veekx\$	57.50 = \$

Note:	"DI O II" "D II" I	
4. Feed	"Blue Seal" or "Poulin" brand  Up to 4 quarts of grain pellets daily	(included in full board
	Grain Type	
	Morning quantity Evening Quantity	
	_ Additional quantity of grain required  Number of additional quarts per day = =	\$ cost to be discussed with LWF management
	discus	availability and cost to be sed with nanagement)
Special F	eeding Instructions:	
E Herr		
5. Hay  Board inc	udes a half a bale of hay per day per horse.	
	Horse will receive hay amounts provided in cost of full boa	ard
	Horse requires extra hay	
	ler will pay the cost of the extra hay. If the horse requires ndicated, the owner's board will be adjusted to reflect the	

\$ C	ost of additional hay (to I	be discussed with LWF Management)	
6. Feed Supplements: Supplements: Supplements: The boar	• •	e's feed will be given to the horse at ements.	t the
NOTE: Supplements must because changes in tempe		ar, or pellet form (no oils or syrups stency.)	
Please list any supplement	s you will be providing for	or your horse:	
7. Additional Care: (boar	rder to supply masks, sh	neets, & spray)	
Horse to wear fly	mask on "buggy" days		
Horse to wear fly		- \$15.00/month paid in advance (no partial payments)	
Horse to be bugg	ed sprayed by barn mar	nager or assistant	
Note:			_
			-

## 8. Veterinarian & Farrier Information:

Boarder's current veterinarian:
Name:
Phone:
Boarder's current farrier:
Name:
Phone:
Living Wells Farm offers the services of Dr. Nichole Mailhot of Branch Equine Veterinary Services, LLC & farrier/blacksmith Matt Guillmette. All boarders are welcome to have their own farrier and veterinarian care for their horse at our facility.  Boarder will will not be using the services of Dr. Nichole Mailhot.  Boarder will will not be using the services of farrier Matt Guillmette
If not using the services of Dr. Nichole Mailhot please complete the information for the veterinarian service you will be using for your horse's care.
Name:
Address:
Telephone:

	Horse requires a winter blanket. Blanket to be provided by the boarder.
Early and	late in the winter season, blankets will be put on at night and removed during
the day if	requested. As the weather gets colder, blankets will be left on day and night
Note:	
Horse ma	ay or may notremain in the pasture during light rain or
	vo (nlagge ghook ang)
warm day	s (please check one).
Note:	& Other Information:
Note:	
Note:	
Note:  0. Allergies  1. Vices:	& Other Information:
Note:  0. Allergies  1. Vices: e permitted	Horses who have dangerous vices such as cribbing, kicking, or biting will not to board at Living Wells Farm. A horse will be asked to leave the facility if
Note:  0. Allergies  1. Vices:  e permitted  ny vices are	B & Other Information:  Horses who have dangerous vices such as cribbing, kicking, or biting will not

11. Please add any additional information you would like us to know.
***** NOTE *****
<u>Coggins</u> : All horses arriving at Living Wells Farm are required to have in their
possession the <b>original</b> results of a current (within a year) negative Coggins test as well
as a copy for our files before unloading from the trailer. (Please note that if you are
trailering your horse through the state of New Hampshire, the Coggins test must be dated
within 6 months as required by that state.)
<u>Vaccines</u> : All horses arriving at Living Wells Farm are required to have a copy of current
(within a year) vaccines which include Rabies, Strangles, 3 way (Eastern, Western, &
Tetanus), and West Nile. Horses are required to have inoculations yearly.
Fecal Tests & Deworming: All horses must provide the results of a fecal count fewer
than 10 within 6 months of arriving at the farm or have the test done within 2 weeks after
arrival. All horses will be dewormed by the owner or the barn manager (fees applied)
according to a schedule approved by the barn manager. Horses must have fecal tests
annually.
I agree that I have provided accurate information to the best of my knowledge and
agree I have read this application in detail.
<del></del>
Signature Date
Print Name