

Helene's Stables

435 Martin's Pond Road
Groton, MA 01450-1429

BOARDING AGREEMENT

Name of boarder: _____

Address: _____

Phone # at home: _____ at work: _____

Name of horse: _____ Gelding or mare or stallion? (circle)

Breed: _____ Age/date of birth): _____

The horse boarder agrees to pay _____/month, starting on the ____ of the month and ending the ____ of the following month. Full board includes (circle) the use of a stall, bedding, feeding and turnout. An additional \$ ____ deworming fee can be added to your monthly payment unless you decide to purchase it yourself from a local store and handle it to Helene in a timely manner. **ALL** horses in the barn must be dewormed at the same time and with the same product. A security deposit for the amount of \$ ____ is required. It will be returned on the date this agreement terminates. A thirty day notice will be required if you decide to leave Helene's Stables. You will be responsible for all additional expenses such as veterinary, dental, farrier and others including **feed** supplements.

Veterinarian: _____ # _____

Farrier: _____ # _____

Dentist: _____ # _____

Others: _____ # _____

Emergency contact: _____ # _____

WARNING: UNDER MASSACHUSETTS LAW, AN EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO, OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES, PERSUANT TO SECTION 2D OF CHAPTER 128 OF THE GENERAL LAWS.

I have read and filled out this boarding agreement. I have also read the rules and regulations of Helene's Stables and I agree to abide by them.:

Signature: _____

Date: _____