



140 Kelseys Mill Road • Campobello, S.C. 29322

OWNER'S INFORMATION SHEET

Submitted To: _____

(Fill out one for each horse boarded.)

Owner's Name		Phone No.(h)	
(as recorded with the Registry)		(w)	
Address			
Street		City	State Zip
Horse's Name and Number			
Foaled	Color	Markings	
Anticipated arrival date		Foal at Side?	
Sire of Foal		Date/last foaling	
Does Horse have any dangerous propensities? If yes, describe:			
Stallion to which mare shall be bred:			
Medical History of Horse:		Colic	Frequency
Founder		When	
Allergies, if known			
Other			
Tetanus Toxoid		Date	
VEE			
Encephalomyelitis (sleeping sickness), Eastern & Western Strains			
Date of last worming		Coggins Test	
Feeding Program:	Hay type	Amount	
	Grain type(s)	Amount	
	Pellets	Amount	
Known allergies to feeds			
Special Care Requirements			
Habits			
To be contacted in case of emergency, if owner cannot be reached:			
Name		Phone Number	
Address			
Is Horse insured?			
Insurance Carrier		Policy #	
Carrier's Address			
Insurance contact for emergencies and phone number:			



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Veterinary emergency contact:	
Name	Phone Number

This Horse is/is not considered a surgical candidate in the event of colic or serious illness (check one).
_____ IS _____ IS NOT

Owner's Initials _____