

MARE BREEDING/BOARDING CONTRACT

(HORSE INFORMATION SHEET)

FOR OFFICE USE ONLY:

ARRIVAL DATE: _____ NECKBAND#: _____ REASON FOR STAY:
 FOAL OUT BREEDING

STALLION BREEDING TO: _____

OWNER INFORMATION

PERSON RESPONSIBLE FOR BILLS: _____

BILLING ADDRESS: _____

EMAIL: _____

HOME PHONE #: _____ CELL PHONE #: _____

HORSE INFORMATION

NAME OF HORSE: _____ BARN NAME: _____

REGISTRY: _____

REGISTRATION NO: _____ AGE: _____ COLOR: _____

MAIDEN MARE: YES NO CARRY EMBRYO FLUSH

FACILITY DOING EMBRYO TRANSFER: _____

PHONE NUMBER: _____

CURRENTLY IN FOAL: YES NO ESTIMATED DUE DATE: _____

SIRE OF FOAL: _____

FOAL ON SIDE: YES NO SEX OF FOAL: FILLY COLT

FOALING DATE: _____ SIRE OF FOAL: _____

HAS FOAL RCVD PLASMA: YES NO

If your foal has not received plasma would you like for Bob Moore Farms, LLC to administer plasma per veterinarian recommended protocol or would you like for your foal to receive additional plasma if they have already received one (1) dose YES NO

In the event the Bob Moore Farms, LLC veterinarian determines your foal requires umbilical hernia repair, do you wish for Bob Moore Farms, LLC to arrange for required repair and transport foal to and from a third-party veterinarian clinic for procedure? Owner will be billed by third-party clinic for all costs incurred due to procedure.

YES NO

HAS MARE BEEN UNDER LIGHTS: YES NO

(If YES) HOW LONG: _____

(If NO) DO YOU WISH FOR HER TO BE PUT UNDER LIGHTS? YES NO

IS MARE OR HAS MARE EVER BEEN ON RUGUMATE: YES NO

LAST FARRIER SERVICE: _____ Please do if needed DO NOT do my horse

INSURANCED WITH: _____

PHONE: _____ **POLICY NO.** _____

Breeding Management/Breeding Cycle Fee for mares being bred to outside stallions is \$350.00 for the initial breeding cycle and \$250.00 for each subsequent cycle. The Breeding Management/Breeding Cycle Fee for mares being bred to stallions standing at Bob Moore Farms, LLC is \$300.00 for the initial breeding cycle and \$200.00 for each subsequent cycle.

Board is in addition to the Breeding Management/Breeding Cycle Fee. Daily board rates for mares is \$15.00 in the pasture for a dry mare, \$18.00 in the pasture for a wet mare, and \$22.00 for mares kept in stalls. Rates are discounted for horses that are boarded with Bob Moore Farms, LLC on a year-round basis.

Trailer-in-and-out services: Payment due at time of service. Additional veterinarian expenses may be billed separately and are payable as invoiced.

TERMS AND CONDITIONS:

INITIAL _____ 1. All bills will be paid by the horse owner and are payable monthly. A 1.5% monthly service fee (18% annual) will be charged to all accounts 30 days past due. All bills must be paid in full before the horse is removed from Bob Moore Farms, LLC. and Bob Moore Farms, LLC may retain possession of horse until all bills are paid in full.

INITIAL _____ 2. Horse owner will provide Bob Moore Farms, LLC with proof the following items prior to or upon horse's arrival

UP-TO DATE VACCINATION INFORMATION:

- ROTAVIRUS: NO YES - DATE GIVEN: _____
- RABIES: NO YES - DATE GIVEN: _____
- EASTERN/WESTERN/TETANUS: NO YES - DATE GIVEN: _____
- RHINO (PNEUMOBORT): NO YES - DATE GIVEN: _____
- FLU: NO YES - DATE GIVEN: _____
- WEST NILE: NO YES - DATE GIVEN: _____
- DE – WORMED: NO YES - DATE GIVEN/TYPE GIVEN: _____
- COGGINS: NO YES - DATE OBTAINED: _____

INITIAL _____ 3. Those items not accompanied by animal may be obtained through Bob Moore Farms, LLC veterinarian at owner's expense.

- **INITIAL** _____ a. If horse is a full time, year-round resident of Bob Moore Farms, LLC all routine vaccinations, farrier services, mandatory testing, etc. will be performed by Bob Moore Farms, LLC staff or third party selected by Bob Moore Farms, LLC and owner agrees to pay all associated fees.

INITIAL _____ 4. Bob Moore Farms, LLC reserves the right to refuse or reject any horse.

INITIAL _____ 5. If an animal is unruly, Bob Moore Farms, LLC reserves the right to charge owner for any special training or management required to maintain animal properly and safely and owner agrees to pay said fee.

INITIAL _____ 6. Owner hereby authorizes Bob Moore Farms, LLC, at owner's expense, to transport horse or consent to such transportation as is necessary by any third-party selected by Bob Moore Farms, LLC while horse is under care, custody, and control of Bob Moore Farms, LLC.

INITIAL _____ 7. Owner will notify Bob Moore Farms, LLC **AT LEAST 24 HOURS PRIOR** to delivering and/or picking up horse. Bob Moore Farms, LLC reserves the right to charge owner if notice is not provided and owner agrees to pay said fee.

EMERGENCY CARE INSTRUCTIONS

We will attempt to contact you should your horse experience a severe case of colic, serious injury, or illness while boarded at Bob Moore Farms, LLC. However, in the event such an emergency arises which cannot be handled by our veterinarians at the farm, and we are unable to reach you, it is important that we know in advance your instructions as to the desired treatment of your horse. Accordingly, please assist us in this regard by completing the simple form below. Initial your requested option below. If you have any other instructions, please add them to the bottom of this form or place them on another sheet of paper and attach them.

INITIAL _____ I request that the Bob Moore Farms, LLC’s veterinarian do whatever is necessary, regardless of the amount of cost, to attempt to save my horse, including shipping the horse to an equine clinic for evaluation and/or surgery.

(OR)

INITIAL _____ I request that the cost of treatment be limited to \$_____. If in the opinion of the Bob Moore Farms, LLC veterinarian such treatment will exceed the above limit, I authorize Bob Moore Farms, LLC to have the horse euthanized.

If your horse is insured, you may want to review the policy or discuss this matter with your insurance agent to determine your responsibilities regarding emergency medical circumstances. Again, be assured that we will do our best to contact you if your horse has a medical emergency. If you have an emergency phone number, please indicate below. If we cannot reach you, we will strive to keep the cost of treatment within the limitation, if any, indicated above. However, Bob Moore Farms, LLC cannot guarantee that any such limitation will not be exceeded. This form is for informational purposes only and to the extent it conflicts with the Breeding Contract or other written agreement, the agreement or agreements shall control.

MARE OWNER

DATE

Emergency Contact Number

ADDITIONAL INFORMATION: _____

