

Horse Boarding Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Number of Horses: _____ Type of Board (pasture, stall, feeding): _____

What Semester?: _____

Student Information (if applicable):

Major: _____ Minor.: _____ Graduation Date: _____

Horse Information

Barn Name: _____ Breed: _____

Age: _____ Sex: _____ Marking/Brands: _____

How long have you owned the horse? _____

Are you the owner? YES ☐ NO ☐ If no, who is? _____ Phone Number: _____

Vices:	Crib	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Special Care/Needs: (i.e. supplements, 1 or 3x/day feeding, etc.)	
	Kick	<input type="checkbox"/>	<input type="checkbox"/>		
	Weaving	<input type="checkbox"/>	<input type="checkbox"/>		
	Buddy Sour	<input type="checkbox"/>	<input type="checkbox"/>		
Other:				History: (Laminitis, choke, etc.)	

Signature

By signing and submitting this application I confirm the information above is correct to the best of my knowledge.

Signature: _____ Date: _____

Please Return to:
SIU Equine Center
2194 Union Hill Rd
Carbondale, IL 62903
OR
s.wuest@siu.edu