



Nottingham Equestrian Center
16848 Towar, East Lansing, MI 48823
(517) 351-7304

BOARDING CONTRACT

Owner _____ Name of Horse(s) _____

Nottingham Equestrian Center (NEC), Inc. is hereby authorized to care for my horse/pony (H/P), and I fully understand and agree to the following:

1. NEC will feed and water my H/P daily.
2. NEC will regularly clean my H/P's stall and provide bedding when appropriate, if stall boarding.
3. NEC will turn my H/P out daily, weather permitting, unless otherwise instructed. NEC will turn my H/P in training out in a paddock only, unless otherwise agreed.
4. It is understood that NEC is not in any way responsible or liable for any sickness, accident, or injury that my H/P may contract or be involved in while boarded at NEC. I will not in any way hold NEC responsible or liable for the death of my H/P by any cause, including (but not limited to) fire, wind, accident, or sickness while boarded at NEC.
5. In the event of a sudden accident, or sickness of my H/P, NEC is hereby authorized to arrange veterinarian services or care for my H/P, and I will assume responsibility for all incurred expenses or charges.
6. I agree to know and follow all NEC rules.
7. I agree to follow NEC policy on veterinarian and farrier service rules and requirements for my H/P.
8. I _____ (do/do not) authorize NEC to arrange veterinary (including vaccinations) and farrier services for my H/P, as necessary and required by NEC policy.
9. I shall be responsible for all veterinary and farrier charges for my H/P, and I understand I will be invoiced for these services separately.
10. I accept full monetary responsibility for any damage done to the stable property, or to other horses, (or to persons), by my self, my guest, or my H/P.
11. I will not hold NEC responsible or liable for damage to, or the loss of tack and equipment belonging to me.
12. I will not take my H/P from the stable, without 48 hours prior notification to NEC management.
13. I agree to pay the amount of Four Hundred Sixty-Five Dollars (\$465) per month for stall board, Three Hundred Fifty Dollars (\$350) for paddock board, plus the cost of feed supplements per month, for boarding of my H/P. Payments are due on or before the first day of each month, and I accept responsibility for any late fees charged at 10% per month for any board payments received after the

seventh day of each month. Notice of any change in this amount will be made by NEC, in writing, no less than thirty (30) days in advance.

14. I have read and fully understand the following notice, as required by the Equine Activity Liability Act: **WARNING! UNDER THE MICHIGAN EQUINE ACTIVITY LIABILITY ACT, AN EQUINE PROFESSIONAL IS NOT LIABLE FOR ANY INJURY TO OR THE DEATH OF A PARTICIPANT IN AN EQUINE ACTIVITY RESULTING FROM AN INHERENT RISK OF THE EQUINE ACTIVITY.**

Termination of this contract by either party will be in writing, with no less than fifteen days (15) notice. I understand, however, that NEC may unilaterally terminate my boarding privilege "for cause", with twenty four (24) hours notice, at which time pro-rated refund of unused board money is guaranteed, less damages or other unpaid charges, should these apply.

I, _____ parent or guardian of _____, acknowledge my awareness of potential hazards of being around horses, and will not hold NEC responsible or liable to the above named minor, to me, to any family member, or to any guest, I may bring to this facility, regardless of cause.

Finally, I acknowledge awareness that all references herein contained to Nottingham Equestrian Center, Nottingham, management, employees, stable, facility, etc. shall be interpreted as including Nottingham Equestrian Center, Inc., its owners, their agents, managers, and employees.

BOARDER _____ PHONE _____ DATE _____
ADDRESS _____ CITY/STATE _____ ZIP _____

In the event that a person other than the boarder is responsible for the financial obligations, notification of charges, changes, etc. will be mailed to that person. Acknowledgement of responsibility for them is also herein implied by signature.

PARTY RESPONSIBLE _____ PHONE _____
ADDRESS _____ CITY/STATE _____ ZIP _____
BOARDER _____
STABLE MANAGEMENT _____ DATE _____

**BOARD AND SUPPLEMENT COSTS
WORK SHEET**

Horse's Name _____

Horse's Owner _____

Supplement	Cost	Your cost
Glucosamine	\$30.00	_____
Biotin	20.00	_____
Bute (1X)	15.00	_____
Probiotic	15.00	_____
Herbal bute	22.00	_____
Vitamin E/selenium	10.00	_____
Basic board		\$465.00
Total board payment		_____