

# Shedhorn Equine Boarding

260 Jackson Rd, White Sulphur Springs, MT 59645  
406.547.3918 Office - 406.439.1807 Cell - 888.439.4094 Fax  
[ShedhornCabins@itsTriangle.com](mailto:ShedhornCabins@itsTriangle.com)

## Overnight / Temporary Boarding Agreement

This agreement is between MT Shedhorn Properties, LLC (dba Shedhorn Horse Boarding) at the location described above and the equine owner described below.

Name of Owner \_\_\_\_\_

Physical Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

PO Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (C) \_\_\_\_\_ (H) \_\_\_\_\_

Email \_\_\_\_\_

The dates of boarding will be from \_\_\_\_\_ (MM/DD/YYYY)

through \_\_\_\_\_ (MM/DD/YYYY). The total number of

days boarded is \_\_\_\_\_.

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This agreement shall be for the boarding of the equine(s) as described below:

1. Barn Name of Equine \_\_\_\_\_

Registered Name \_\_\_\_\_

Age \_\_\_\_ Breed \_\_\_\_\_ Color \_\_\_\_\_ Sex \_\_\_\_

Current Insurer \_\_\_\_\_

Policy # \_\_\_\_\_

Disclose Equine's Special Needs or Concerns \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Other Pertinent Information \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

2. Barn Name of Equine \_\_\_\_\_

Registered Name \_\_\_\_\_

Age \_\_\_\_ Breed \_\_\_\_\_ Color \_\_\_\_\_ Sex \_\_\_\_

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Current Insurer \_\_\_\_\_

Policy # \_\_\_\_\_

Insurer Emergency Phone # \_\_\_\_\_

Disclose Equine's Special Needs or Concerns \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Other Pertinent Information \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Identify all primary health and training contacts for equine(s).

Vet \_\_\_\_\_ Phone \_\_\_\_\_

Farrier \_\_\_\_\_ Phone \_\_\_\_\_

Trainer \_\_\_\_\_ Phone \_\_\_\_\_

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The Owner and Shedhorn Horse Boarding agrees to the following:

1. **PAYMENT.** Owner agrees to pay, in advance, a fee of \$35 per day per equine for boarding in a 25' x 25' metal pen, \$125 per day for a 40' x 40' corral or \$150 per day for a 60' x 40' metal corral. Discounts may apply. Cash or credit card will be accepted. Each pen includes access to water, a feed bunk and a bucket for water or additional feed. Parking is available for stock trailers and extra vehicles.
2. **Owner Equine Care Responsibilities.** Owner must provide to their equine(s) daily all feed, medication, and supplements/minerals.
3. **Health Papers.** Owner agrees to have vet fax health papers to Shedhorn Horse Boarding prior to arrival or deliver papers when checking into the facility. Equine(s) without health papers will not be allowed to board.
4. **EMERGENCY CARE.** Shedhorn Horse Boarding agrees to attempt to contact Owner should Shedhorn Horse Boarding determine veterinary treatment is needed for said equine(s). However, if Shedhorn Horse Boarding is unable to contact Owner, Shedhorn Horse Boarding is then authorized to secure emergency veterinary care required for the health and well-being of said equine(s).
5. **MEDICAL FEES.** All costs of emergency medical care incurred shall be paid by Owner directly to the Vet.
6. **LIEN.** Shedhorn Horse Boarding shall have and is hereby granted a lien for all boarding and other charges resulting from the boarding of said equine(s).

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## 7. LIABILITY.

- a. Shedhorn Horse Boarding shall incur no liability regarding costs related to emergency medical care.
- b. Shedhorn Horse Boarding shall not be liable for any damage that may accrue from any cause including, but not limited to, fire, theft, running away, or unknown hazards on the property.

**MONTANA LAW.** Under Montana Law, an equine activity sponsor or an equine professional is not liable for an injury to or the death of a participant engaged in an equine activity resulting from risks inherent in equine activities. Montana Code Annotated 27-1-727.

By signing below, Owner agrees to all terms and conditions of this Agreement.

OWNER

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DATED \_\_\_\_\_

SHEDHORN HORSE BOARDING REPRESENTATIVE

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DATED \_\_\_\_\_