



VOLO FARM, INC.

84 Powers Road
Westford, MA 01886
978 692-7060

BOARDING AGREEMENT

This agreement is made between VOLO FARM, INC. (“VOLO FARM”) and _____ (“OWNER”), owner of the horse or pony described in Paragraph 3. This agreement is subject to the laws of the State of Massachusetts. The parties have executed this Agreement on _____, 200__.

1. Fee/Services

In consideration of \$_____ per horse or pony per month paid by owner, with payment for the first month having been made this date, and subsequent payments due no later than the 10th day of each subsequent month, VOLO FARM agrees to board said horse or pony beginning _____ on a month-to-month basis. The following services will be provided by VOLO FARM:

2. Right of Lien

VOLO FARM has the right of lien as set forth in the laws of the State of Massachusetts for any amounts due for board and any additional agreed-upon services; and VOLO FARM shall have the right, without process of law, to retain said horse or pony until the indebtedness is satisfactorily paid in full.

3. Description of Horse or Pony

Name _____
Age _____ Sex _____ Height _____
Breed _____
Color _____
Markings _____
Reg or Tattoo No. _____

[] Additional horse(s) or pony(ies) described on attachment.

4. Standard of Care

VOLO FARM agrees to provide normal and reasonable care to maintain the health and well-being of each horse or pony described above.

5. Ownership/Coggins Test/Risk of Loss

OWNER warrants that he or she owns each horse or pony described above and will provide with respect to each, prior to delivery, proof of a negative Coggins test and vaccination record to VOLO FARM to be kept on file.

Initial

Owner further warrants that each horse or pony described above is covered by a policy of mortality insurance issued in the name of the OWNER in an amount sufficient to compensate the OWNER in the case of injury, loss or death of any such horse or pony. During the time that the horse(s) is/are in the custody of VOLO FARM, VOLO FARM shall not be liable for any sickness, disease, theft, death or injury which may be suffered by the horse. This includes, but is not limited to, any personal injury or disability the horse may receive while on VOLO FARM's premises. OWNER fully understands and hereby acknowledges that VOLO FARM is not obligated to carry insurance on any horse(s) not owned by it, including, but not limited to, insurance for boarding or any other purposes, for which the horse(s) is/are covered under any public liability, accidental injury, theft or equine mortality insurance, and that all risks relating to boarding of horse(s), or for any other reason, for which the horse(s) is/are in the possession of VOLO FARM, are to be borne by OWNER. OWNER will hold VOLO FARM harmless for any injury or death resulting from any fire.

6. Emergency Care

If emergency care of any horse or pony is needed, VOLO FARM will attempt to contact OWNER and/or contact the OWNER's veterinarian, as follows:

In the event OWNER or OWNER's veterinarian is not reached, VOLO FARM has the authority to secure emergency veterinary, dental or farrier care. OWNER is responsible for payment of all costs relating to this care. VOLO FARM is authorized as OWNER's agent to arrange billing to OWNER.

Initial

OWNER also gives/does not give (circle one and initial) permission for the administration by a veterinarian of IM as well as IV injections, if deemed necessary by VOLO FARM staff. OWNER understands that any injection can be associated with certain risks, including death to said animal. VOLO FARM has the right to quarantine or isolate any horse when VOLO FARM staff deems it advisable to do so.

7. Release

OWNER agrees to review and sign a form of Release and Agreement to Indemnify.

8. Termination

Either party may terminate this Agreement upon thirty (30) days written notice to the other. If less than thirty (30) days notice is given before moving said horse, OWNER is liable to VOLO FARM for 30 days board for time notice is given.

Stable

Signature: VOLO FARM, INC.
By _____

Address 84 Powers Road, Westford, Massachusetts 01886

Telephone 978 692-7060 Hall phone 978 392-7851

Owner

Name _____

Signature _____

Address _____

Telephone _____

Emergency number _____