



**STAR EQUESTRIAN CENTER  
HORSE TRIAL AGREEMENT**

**Horse Owner Information:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Horse Information:**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Breed/Type: \_\_\_\_\_ Reg. #: \_\_\_\_\_

Sex: \_\_\_\_\_ Color: \_\_\_\_\_ Markings: \_\_\_\_\_

Horses on trial need to have all regular health maintenance completed before coming to STAR

Pre-existing medical issues: \_\_\_\_\_

Date of Neg. Coggins Test: \_\_\_\_\_ Date of last farrier work: \_\_\_\_\_

Date of last dental work: \_\_\_\_\_ Date of last de-worming: \_\_\_\_\_ Wormer Used: \_\_\_\_\_

Date of yearly vaccination: \_\_\_\_\_ Vaccinations Given: \_\_\_\_\_

Current Realistic Value of Horse as derived by owner: \_\_\_\_\_

Date came to STAR: \_\_\_\_\_

Trial begins: \_\_\_\_\_

Trial ends: \_\_\_\_\_

\_\_\_\_\_, hereby agrees to release said horse to Star Equestrian Center for the purpose of riding therapy and recreation for disabled and abled riders. The above named owners are not liable for costs incurred for the normal, daily maintenance (farrier, veterinarian, nutrition) of said horse while in trial period. Owner will be liable for any catastrophic medical issue or a pre-existing medical issue. Said horse will be involved in a training trial period minimum of 30 days and a maximum of 90 days. Time of trial period will be determined by Equestrian center staff based on the personality and ability of horse. Star Equestrian Center will provide liability insurance for said horse for damage or loss caused by said horse during the trial period. Extra maintenance responsibilities and costs will be agreed upon at the time of trial period, with said owner providing financial support for said horse at the Center during the trial period. Owner may not remove said horse from Star Equestrian Center facility at any time during the trial period without prior arrangement with the director of the facility. It is understood that the procedure for safety, equine care, and management laid down in the guidelines of the North American Riding for the Handicapped Association and Certified Horsemanship Association will be adhered to. The said horse will undergo training and testing to determine if he/she possesses the appropriate personality and is of sound health and mind. Star Equestrian Center reserves the right to call said owners at any given time of trial period if it is deemed that the horse is not appropriate for the program. Said owners are responsible to pick up the horse within 72 hours. At the end of the trial period a vote and discussion will occur with staff of Star Equestrian Center to determine if said horse is deemed appropriate for program. If the horse is deemed appropriate either a donation confirmation or lease agreement will be completed and signed by both parties.

Printed Name \_\_\_\_\_

Owner Signature \_\_\_\_\_

Executive Director Signature \_\_\_\_\_

Director Signature \_\_\_\_\_