Millpond Equestrian Center

Mailing address: 590 Rocking K Rd., Bishop, CA. 93514 **Boarding Agreement**

Telephone (760)873-6037 Fax (760)873-6034

I agree to hold **Millpond Equestrian Center** and **Flying H Stables** harmless from any illness or injury of my horse(s) or mule(s). **Millpond Equestrian Center** and/or **Flying H Stables** agree to notify owner of any illness or injury by telephoning owner upon discovery of any illness or injury.

Date	Signature
Name	
	City
State	Zip Code
Telephone Number	Cell phone Number
Horse Name	Breed
Immunizations (type & la	st date)
	Departing on
The daily board will be (4 Barn stalls:	ral: night or less) \$30 per nightpayable in advance nights or more) \$25 per nightpayable in advance 40 per nightpayable in advance
Horse or mule will be state Barn Partially covered	
Other comments or instru-	ctions: Please return this form with your check to complete your

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