

Please fill out form completely. One form per animal. It is recommended that this form is completed ahead of time and kept in an easily accessible spot such as a trailer or medical kit along with any specialty items your animal may need such as medications. Keep a photo of your animal with you.

Owner(s) Name: _____

#(s): _____

Address: _____

Alternative Contact (spouse, family, friend): _____

Alternative contacts phone #: _____

Vet
name: _____

Vet phone number: _____

Horse's/Animal's name: _____

Breed: _____ Sex: _____

Animal Color: _____

Animal markings: _____

Current Hay/feed: _____

Number of pounds per day: _____

Suppliments: _____

Medications: _____

Medications present with horse : Yes / No

Medical conditions: _____

Allergies: _____

Multiple Pictures of Animal Copy of Owner ID Copy of EIA ID Tag on animal

Are you leaving your trailer: Yes / NO Trailer license plate #: _____

I hereby give consent to emergency staff to feed, water, give medical attention/emergency transport to my horse(s)/ animal(s) while I am not present.

Signature: _____ Date _____

- Administrative -

Stall #: _____

Checked in by/witness: _____