

February 8<sup>th</sup>, 2015

## SAGEHILL STABLES

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Re: Request for new client information

Dear new client:

Sagehill Stables requests some background information on our clients to keep on record in case of a medical emergency and for insurance purposes. All personal information will be kept confidential. Please add any pertinent information that would assist Sagehill Stables work with you and your horse better, including any information that would help you and/or your horse in the case of a medical emergency.

Please fill in and return the New Client Information Forms before your first ride at Sagehill. We will contact you annually to update this information, but please let us know if your information changes in the meantime.

Sagehill posts daily pictures of your horse on Instagram and Twitter so that you can see how it's doing on days you can't make it out. If you do not want pictures of your horse posted please let us know. You do not have to have an account to view the pictures, just visit the webpage's: [www.instagram.com/sagehillstables](http://www.instagram.com/sagehillstables) and [www.twitter.com/sagehillstables](http://www.twitter.com/sagehillstables). We also have a calendar and blog page available for clients only on our website at [www.sagehillstables.com](http://www.sagehillstables.com). Please register on the site to access these resources.

We hope you enjoy your time at Sagehill Stables!

Sincerely,

Sagehill Stables

**Client Information Form:**

Date: \_\_\_\_\_

Full Name: \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

Phone numbers: \_\_\_\_\_

Email: \_\_\_\_\_

Age: \_\_\_\_\_

Birthday: \_\_\_\_\_

Parent(s) or Guardian(s) Name, Address, Phone and email if owner is under 18

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Emergency contact person, phone numbers, and relationship to you:

\_\_\_\_\_

\_\_\_\_\_

Health or medical problems we should be aware of in case of an accident or medical emergency

(Include medication, conditions, doctors and any other information you feel appropriate for us to know)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How many years have you been riding and your skill level?

\_\_\_\_\_

\_\_\_\_\_

Personal goals you want to achieve at Sagehill and

any additional comments you'd like to include:

\_\_\_\_\_

\_\_\_\_\_

**Horse Information Form (fill out one sheet per horse):**

Date: \_\_\_\_\_

Client Name: \_\_\_\_\_

Name of Horse and Description (include sex, breed, age, height, colour, and markings):

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Are you the primary owner or leasing? \_\_\_\_\_

How long have you owned/leased? \_\_\_\_\_

Pertinent history of the horse and additional comments (e.g. personality/behavior issues, riding experiences, medical conditions and farrier history)

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Veterinary Service Used:

- Stable vet: Central Veterinary Clinic
- Or, personal vet

Contact information for personal vet:

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Farrier Service Used:

- Stable farrier: Sherri Parkinson, v.t.
- Or, personal farrier

Contact information for personal farrier:

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