

Arista Ranch Service Contract

This agreement made _____ between Jana L. Olsen DBA Arista Ranch LLC, also known as "OQH Enterprises LLC, located at 55050 W. US HWY 275, Norfolk, NE 68701, and the undersigned individuals, lessees, or clients, hereinafter known as "CLIENT."

CLIENT IDENTIFICATION:

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

EMERGENCY CONTACT NAME, RELATIONSHIP, ADDRESS, AND PHONE:

SERVICES (please select):

- SELF CARE BOARD (STALL/OUTSIDE DRY RUN)- \$250/MO PER HORSE
- RIDING MEMBERSHIP INDIVIDUAL- \$225/YEAR
- RIDING MEMBERSHIP FAMILY- \$325/YEAR

RIDING MEMBERSHIP: (LIST INDIVIDUAL/FAMILY MEMBER NAMES AND AGES)

_____, _____
_____, _____

Dates of last immunization and worming:

E/W _____ FLU: _____ Rhino: _____ Strangles: _____ Tetanus: _____

Worming: _____

Do you give Arista Ranch authorization to contact a vet in case of emergency if you are unable to be contacted? Yes _____ No _____

By signing below, I agree to pay Arista Ranch LLC and any service provider independent of Arista Ranch for care and treatment of my horse(s) and failure to do so, may result in legal action. Arista Ranch LLC has the right to refuse service to any individual who violates prudent animal husbandry practices and proper treatment of the animal/horse while at ARISTA RANCH LLC.

CLIENT SIGNATURE: _____ DATE: _____

ADDRESS: _____

CELL PHONE: _____ WORK PHONE: _____

EMERGENCY CONTACT (NAME, ADDRESS, AND PHONE)

