

Application for Horse Development Form

Print, Complete and Post

Horse Name: _____ Value: \$ _____

Colour: _____ Breed: _____ Age: _____

Owner's Name: _____ Date: _____

Owner's Address: _____ Postcode: _____

Owner's Phone Number: _____ Owner's Email: _____

Owner's Savvy Club Member Number: _____

Which Parelli Level of Training Are YOU Interested In Obtaining? (Details Available)

- | | | | |
|----------------------------------|------------------------------------|------------------------------------|------------------------------------|
| <input type="checkbox"/> Level 1 | <input type="checkbox"/> Level 2 | <input type="checkbox"/> Level 3 | <input type="checkbox"/> Level 4+ |
| | <input type="checkbox"/> On Line | <input type="checkbox"/> On Line | <input type="checkbox"/> On Line |
| | <input type="checkbox"/> FreeStyle | <input type="checkbox"/> FreeStyle | <input type="checkbox"/> FreeStyle |
| | | <input type="checkbox"/> Liberty | <input type="checkbox"/> Liberty |
| | | | <input type="checkbox"/> Finesse |

What type of Horse Development do you require for your horse?

- Young Horse Handling Colt Starting Foundation Training

What Are Your Goals For This Horse? Please tick the most appropriate answer

- Recreation and Pleasure
- Competition (please specify): _____
- Work Partner
- Breeding
- Child's/Family Horse
- Other (please specify): _____

Optional

What do you think your horse's Horsenality™ is?

- Right Brain Introvert
- Right Brain Extrovert
- Left Brain Introvert
- Left Brain Extrovert

What qualities, of your horse, are most important to you?

On the Ground (please tick 5 most important)

- | | |
|--|--|
| <input type="checkbox"/> Catch | <input type="checkbox"/> Moves Away By Suggestion |
| <input type="checkbox"/> Lead | <input type="checkbox"/> Backs up and comes forward |
| <input type="checkbox"/> Confident | <input type="checkbox"/> Circles around you at walk and trot |
| <input type="checkbox"/> Stands well while tied | <input type="checkbox"/> Goes Sideways |
| <input type="checkbox"/> Feet Handling | <input type="checkbox"/> Goes under and over objects |
| <input type="checkbox"/> Responsive | <input type="checkbox"/> Accepts loud noises |
| <input type="checkbox"/> Trailer Load | |
| <input type="checkbox"/> Grooming/washing/clipping | |
| <input type="checkbox"/> Accepts Touch Everywhere | |
| <input type="checkbox"/> Yields from Pressure | |

Parelli Natural Horsemanship, Inc
50 Lisa Road
Wilton, NSW 2571
02 4630 9677
australia@parelli.com

Under Saddle/Riding (please tick 5 most important)

- | | |
|--|--|
| <input type="checkbox"/> Friendly/Confident | <input type="checkbox"/> Responsive |
| <input type="checkbox"/> Accepts saddle without being tied | <input type="checkbox"/> Can ride in a halter/hackamore and a bridle |
| <input type="checkbox"/> Lowers head to bridle | <input type="checkbox"/> Confident in open spaces |
| <input type="checkbox"/> Goes forward willingly | <input type="checkbox"/> Brave on Trail Rides |
| <input type="checkbox"/> Stops easily | <input type="checkbox"/> Crosses water, logs, etc |
| <input type="checkbox"/> Turns lightly | <input type="checkbox"/> Jumps obstacles |
| <input type="checkbox"/> Backs up | <input type="checkbox"/> Goes under low objects |
| | <input type="checkbox"/> Accepts loud noises |

Is there any other information Parelli should be made aware of about this horse (past training, Vices such as cribbing, history, and difficulties with Farrier, Float, Vet, etc)

Signature of Owner: _____ Date: _____



Robert McAuliffe, RMHB Pty Ltd
Licensed Parelli Professional
Address: 50 Lisa Road, Wilton, NSW 2571 Australia
Email: rob@robmauliffe.com
Phone: +61 (0) 246 309 443
ABN# 47 632 466 510

Horse Development Agreement Form

Print, Complete and Post

please ensure you post the hardcopy well before the start of your horses training

FEES

Full payment to be paid before start of course.

Breakdown of Costs

Young Horse Handling: 2 weeks (10-12 hours) minimum, \$75.00 per hour plus GST. TRAINER (Rob McAuliffe/RMHB PTY LTD) will revise at 6 hours and cost could increase depending on horse and Horsenality™, to be discussed with the OWNER*
TOTAL:\$ _____

*Colt Starting (4 years and under): 3 week minimum, \$500.00 per week plus GST**
TOTAL:\$ _____

Colt Starting (5 years and over): \$500.00 per week plus GST, time schedule to be determined after a 2-hour horse assessment, \$200.00 on assessment to be deducted from overall training cost if horse is taken on by TRAINER (Rob McAuliffe/RMHB PTY LTD) otherwise, the assessment cost is \$200.00 plus GST*.*
TOTAL:\$ _____

Foundation Training: price and time schedule to be determined after a 2-hour horse assessment, \$200.00 on assessment to be deducted from overall training cost if horse is taken on by TRAINER (Rob McAuliffe/RMHB PTY LTD) otherwise, the assessment cost is \$200.00 plus GST, 60-100 hour minimum, equivalent to 2-3 months.*
TOTAL:\$ _____

***Extras:** All Board, Feed, Vet, Farrier, Bodywork, Wormer, Health Care needs, Emergency Care will be at the cost of the OWNER. See 'Emergency Care' section (Horses that are on the property and within the care of RMHB Pty Ltd outside of the designated training period will incur an additional board and care fee of \$120.00/week.) Handover clinic will also incur additional fees.

Cheques made payable to 'RMHB Pty Ltd'. Invoices for extra fees to be posted at the end of each month, payment to be received within seven days.

DESCRIPTION OF HORSE(S)

Name: _____

Age: _____

Colour: _____

Sex: _____

Breed: _____

Insurance Carrier, Policy and phone number *(if applicable)*:

I, _____, hereby confirm that I am the OWNER for the above mentioned horse and give consent for this horse to be handled, started under saddle, transported, boarded, cared for and receive first aid and health care as deemed necessary by TRAINER (Rob McAuliffe/RMHB PTY LTD) and staff.



Robert McAuliffe, RMHB Pty Ltd
Licensed Parelli Professional
Address: 50 Lisa Road, Wilton, NSW 2571 Australia
Email: rob@robmauliffe.com
Phone: +61 (0) 246 309 443
ABN# 47 632 466 510

FEED AND FACILITIES

TRAINER (Rob McAuliffe/RMHB PTY LTD) agrees to provide normal and reasonable care and handling to maintain the health and well being of the horse(s).

OWNER agrees that the facilities and staff caring for and training the horse are acceptable and OWNER is satisfied with the arrangements for the daily routine and care of the horse including feeding, stalling and turnout.

TRAINER (Rob McAuliffe/RMHB PTY LTD) has the right to adjust the routine of the horse as it has been shown to me if the trainer believes that the continuing practice may prejudice the welfare of the horse: such adjustments include change of feeding regime, trimming of feet or shoeing, additional rest periods for the horse, dental care and bodywork treatments. OWNER agrees to pay for the additional costs of these services.

Any feed and dietary requirements must be provided by the OWNER. Horses will be fed according to OWNER'S request. Horse board, shoeing, dentistry, vet/healthcare needs are extra and will be payable by the OWNER at the end of each month.

RISK OF LOSS

During the time that the horse(s) is/are in the custody of the TRAINER (Rob McAuliffe/RMHB PTY LTD), the TRAINER (Rob McAuliffe/RMHB PTY LTD) shall *not* be liable for any sickness, disease, theft, death or injury which may be suffered by the horse. This includes, but is not limited to, any personal injury or disability the horse may receive while on TRAINER (Rob McAuliffe/RMHB PTY LTD) premises. OWNER fully understands and hereby acknowledges that TRAINER does not carry any insurance on any horse(s) not owned by TRAINER (Rob McAuliffe/RMHB PTY LTD), including, but not limited to, such insurance for boarding or any other purposes, for which the horse(s) is/are covered under any public liability, accidental injury, theft or equine mortality insurance, and that all risks relating to boarding and training of horse(s), or for any other reason, for which the horse (s) is/are in the possession of TRAINER (Rob McAuliffe/RMHB PTY LTD), *are to be borne by OWNER*. Vehicles left on the premises are left at the owner's risk.

HOLD HARMLESS

OWNER agrees to hold TRAINER (Rob McAuliffe/RMHB PTY LTD) harmless from any claim resulting from damage or injury caused by said horse, OWNER or his guests and invitees, to anyone, including but not limited to legal fees and/or expenses incurred by TRAINER (Rob McAuliffe/RMHB PTY LTD) in defence of such claims.

EMERGENCY CARE

TRAINER (Rob McAuliffe/RMHB PTY LTD) agrees to attempt to contact OWNER, at the following emergency telephone number (_____), should TRAINER (Rob McAuliffe/RMHB PTY LTD) feel that medical treatment is needed for said horse(s), provided however, that in the event the TRAINER (Rob McAuliffe/RMHB PTY LTD) is unable to so contact OWNER within a reasonable time, which time shall be judged and determined solely by TRAINER (Rob McAuliffe/RMHB PTY LTD), TRAINER (Rob McAuliffe/RMHB PTY LTD) is then hereby authorized to secure emergency veterinary care and/or blacksmith care, and by any licensed providers of such care who are selected by TRAINER (Rob McAuliffe/RMHB PTY LTD), as TRAINER (Rob McAuliffe/RMHB PTY LTD) determines is required for the health and well-being of said horse(s). The cost of such care secured shall be due and payable by OWNER within fifteen days from the date OWNER receives notice of cost.

Special Instructions to BARN



Robert McAuliffe, RMHB Pty Ltd
Licensed Parelli Professional
Address: 50 Lisa Road, Wilton, NSW 2571 Australia
Email: rob@robmauliffe.com
Phone: +61 (0) 246 309 443
ABN# 47 632 466 510

To the best of OWNER'S and TRAINER'S (Rob McAuliffe/RMHB PTY LTD) knowledge, the HORSE has no unsoundness or health problems on date of arrival which would cause the HORSE to be unfit for regular training.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A CONTRACT BETWEEN MYSELF (OWNER) AND THE TRAINER (ROB MCAULIFFE) AND I AGREE THAT I SIGN OF MY OWN FREE WILL AND THAT THIS AGREEMENT WILL BIND ME, MY LEGAL REPRESENTATIVES, DISTRIBUTEES, GUARDIANS, ASSIGNS, HEIRS AND NEXT OF KIN AND THAT IT MAY BE PLEADED IN BAR TO ANY LEGAL ACTION COMMENCED IN ANY COURT CONTRARY TO THE TERMS HEREOF.

AGREEMENT:

Executed at: _____ Date: _____

TRAINER (Rob McAuliffe/RMHB PTY LTD) Signature: _____

OWNER Signature: _____

Owner's Name: _____

Address: _____ Postcode: _____

Phone: _____

Email: _____