

Olds College Continuing Education Biosecurity and Stabling Agreement

This agreement, entered into this _____ day of _____, 20____ by Olds College and _____ of _____ (town, province), hereinafter referred to as Owner/s has the following horse on campus for use in _____ (Course name).

Registered Name: _____ &/or Barn Name: _____

Age _____ Breed _____ Color _____ Sex _____

A. Health, Medication, Veterinarian, and Farrier:

1. The Owner warrants that the above mentioned horse is free of infectious diseases and/or communicable diseases. The above mentioned horse must also comply with the following health regulations:
 - a. Has been dewormed within the last 3 months
 - b. Has been vaccinated for both Strangles and 2 Way (Flu/Upper Resp. Rhino) within the last 6 months (at least 2 weeks prior to arriving on campus).
2. The Owner hereby authorizes Olds College to obtain any necessary reasonable veterinarian care in an emergency situation.
3. The full expense of all health treatments, farrier, and veterinarian care will be the Owner's responsibility.
4. The Owner acknowledges that all horses brought onto Olds College property remain the responsibility of the Owner and as such release Olds College from any liability in case of an accident or illness.

B. General Terms and conditions

1. Horses being used by the Owner in Continuing Education courses have stabling provided as per the course description.
2. Each student will be provided with a stall for their horse – please use only the stall identified for your use.
3. Owners are responsible to provide all their own feed, feed tubs, water buckets, wheel barrow and stall cleaning equipment. Shavings are available for bedding the horses.
4. Owners are responsible for feeding and watering their own horses
5. It is the responsibility of owners to strip, sweep and spot wash the stall(s) they use, as well as clean the alley in front of the stall(s). If a turn-out pen is utilized, all manure must also be removed from that pen. This clean-up must be done to Olds College standards prior to the student's departure.

This agreement is effective from _____ to _____, 20_____.

Olds College

Horse Owner

Address

City/Town

Province/State Postal Code

Phone Number

Date

Please complete and return this form a minimum of one week prior to the course start:

email: coned@oldscollege.ca

or fax: 403-556-4752