

Horse Owner/Equestrian Emergency Form

For _____
(name of event)

In the event of an emergency that makes you unable to care for your Horse please leave us instructions on how to proceed.

SCA Name: _____

Legal Name: _____

Horse(s) Name(s): _____

In Case of Emergency Please Contact:

Name: _____

Phone Number: _____

Relationship: _____

In the interim how should we care for your animal at the event (feed, water, habits, etc)

If you or your emergency contact person is unable to take your horse home at the end of the event, it may become necessary for someone else to make arrangements to move your horse. Please give instructions below or give permission for another SCA member to take care of this for you.

I give permission for the Equestrian Marshal In Charge to arrange for the removal of my horse from The event, and to arrange for the care of my horse after the event. I agree to pay any boarding fees That may be incurred until myself or my agent is able to collect my horse.

I give permission to the following person present at this event to arrange for the removal of my horse from the event, and to arrange for the care of my horse after the event. I agree to pay any boarding fees that may be incurred until myself or my agent is able to collect my horse.

SCA Name: _____

Legal Name: _____

Other: Please Specify _____

Signed and Dated: _____