

Equine Performance & Rehabilitation Solutions

Horse History & Client Record Form

Owners Name:	Phone:	
Address		
Address:		
Email:		
Horses Name:	Age:	
Breed:	Height:	Colour:
Mare/Gelding/Stallion	Discipline:	
How long have you owned this horse for?		
Illnesses/Injuries/Surgery History Please include dates & vet involved		
Current Complaint or Performance Issue:		

Please email completed form to equine.p.r.s@gmail.com