

# DAN KEEN HORSEMANSHIP

Keen's Equine Services, Inc.  
1838 FM 1291 - Round Top, Texas 78954  
[www.dankeenhorsemanship.com](http://www.dankeenhorsemanship.com)

THIS AGREEMENT dated \_\_\_\_\_, 2011 by and between DAN T. KEEN (DAN KEEN HORSEMANSHIP) OF KEEN'S EQUINE SERVICES, INC. ("TRAINER") and \_\_\_\_\_ ("OWNER") is for the training services of OWNER'S horse(s) referenced as or named \_\_\_\_\_.

UPON DELIVERY OF HORSE, OWNER must present TRAINER a copy of the negative Coggins. OWNER agrees that the training services will be for a term of **30 days** for the total amount of **\$1,050.00**, which will include feed and board. **There will be no refunds if OWNER picks up their horse before the 30 day period has ended.** OWNER must remit upon delivery, the total amount of **\$1,050.00**, which is payment for **30 days** of training services. TRAINER will be responsible for supplying feed and hay for the horse while in training. After the training days are completed and the OWNER would like for the horse to stay additional days or if training period exceeds the initial time period, a cost of **\$35.00 per day** will be charged. **THIS CHARGE IS IN ADDITION TO THE ORIGINAL AGREED AMOUNT AND WILL INCLUDE FEED AND BOARD ON A PER DAY BASIS.** Should OWNER request horse to stay in training for an additional 30 days, an additional **\$1,050.00** must be delivered, paid through Pay Pal or mailed to Dan Keen of Keen's Equine Services, Inc. at that time. **PLEASE NOTE A LATE FEE OF FIFTY DOLLARS (\$50.00) WILL BE CHARGED TO YOUR ACCOUNT IF PAYMENT IS NOT RECEIVED WITHIN TEN (10) DAYS OF BILLING. THERE WILL BE NO REFUNDS FOR OWNERS THAT CHOOSE TO PICK UP THEIR HORSES PRIOR TO THE THIRTY DAY (30) TRAINING PERIOD.**

OWNER agrees that TRAINER shall not be responsible for any injuries, health problems, accidents, loss due to theft, death, etc. that might occur to OWNER'S horse while in TRAINER'S custody.

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In the event an accident or injury occurs, **OWNER** gives **TRAINER** permission to contact **TRAINER'S** veterinarian to provide immediate medical services. All medical expenses that are provided by **TRAINER** will be at **OWNER'S** expense.

If additional hoof care is needed during course of training period, **OWNER** gives **TRAINER** permission to provide services at **OWNER'S** expense.

**OWNER** also agrees to indemnify and hold **TRAINER** harmless and defend (with **TRAINER** to choose defense counsel) for any damages caused by **OWNER'S** horse to any property, to **OWNER** or other persons and for any indirect or consequential damages that may occur as a result of any of the foregoing.

**FIELD TRIPS:** Horse **OWNERS** will have the option to pay additional **\$25.00** per outing to take horse to other facilities for further training/exposure. Field trips are taken once a week to various locations.

**STALLIONS** will be an additional **\$100.00** per month for training.

All horses that are sold by **TRAINER** will pay a **ten percent (10%)** commission to **TRAINER** due at final sale.

**TEMPORARY SURCHARGE:** There will be a temporary surcharge for feed and hay of \$45.00 per month until further notice.

**AGREED** upon this \_\_\_\_\_ day of \_\_\_\_\_, 2011.

**OWNER**

**KEEN'S EQUINE SERVICES, INC.**

**DAN T. KEEN**

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## *Horse Training Contact Information*

<i>Date Horse Received:</i>	
<i>Pick Up Date:</i>	
<i>Horse's Name(s):</i>	
<i>Owner's Name:</i>	
<i>Address:</i>	
<i>Home Number:</i>	
<i>Work Number:</i>	
<i>Cell Number::</i>	
<i>E-mail Address:</i>	
<i>Horse Insurance Coverage Provider:</i>	
<b>Provide Copies of:</b>	
<b>Horse Insurance</b>	(    )
<b>Coggins Papers</b>	(    )
<b>Medical/Shot Records</b>	(    )
<i>Field Trip Option:</i>	<i>Accept</i> (    )
	<i>Decline</i> (    )
<i>Additional Information:</i>	