



Horse Information Sheet

About:

Horse's Name: Scooter Xtreme
Gender: Gelding D.O.B: 23/10/16 Colour: Chestnut
Height: 16.1hh Officially Measured: YES / NO Height Certificate: YES / NO
Breed: Warmblood Registration Details: -
Sire: Numero Uno Xtreme Dam: Leggato

Handling Information:

Is the horse/pony safe to do the following task:

Catch: <input checked="" type="radio"/> YES / NO	Lead: <input checked="" type="radio"/> YES / NO	Groom: <input checked="" type="radio"/> YES / NO
Trim: <input checked="" type="radio"/> YES / NO	Shoe: <input checked="" type="radio"/> YES / NO	Worm: <input checked="" type="radio"/> YES / NO
Clip: <input checked="" type="radio"/> YES / NO	Tie Up: <input checked="" type="radio"/> YES / NO	Saddle: <input checked="" type="radio"/> YES / NO
Rug: <input checked="" type="radio"/> YES / NO	Lunge: <input checked="" type="radio"/> YES / NO	Feed: <input checked="" type="radio"/> YES / NO

Does the horse load easily onto a float: YES / NO

Does the horse load easily onto a truck: YES / NO

Does the horse travel well on a float/truck: YES / NO

If you have answered no or your not sure about any of the above then please describe below:

Never been on a float.

Ridden Information (under saddle):

Is the horse in ridden work: YES / NO If not when was it last ridden: _____

How long has the horse been under saddle: 8 months

Is the horse/pony safe to do the following tasks: _____

Mount: <input checked="" type="radio"/> YES / NO	Dismount: <input checked="" type="radio"/> YES / NO	Hack: <input checked="" type="radio"/> YES / NO
Beach Ride: YES / NO	Ride Alone: <input checked="" type="radio"/> YES / NO	Ride in Company: <input checked="" type="radio"/> YES / NO
Arena Ride: <input checked="" type="radio"/> YES / NO	Showjump: <input checked="" type="radio"/> YES / NO	X - Country: YES / NO

If you have answered no or your not sure about any of the above then please describe below:

Never been to a beach or X-country.



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Does the horse have any known or previous health issues: YES / NO If yes describe:

Does the horse have any known or previous soundness issues: YES / NO If yes describe:

Has your horse had colic: YES / NO If yes, when: _____

Please describe your horses temperment: _____

Any Additional Information:

Owner/Agent Signature: Emily Hayward

Full Name: Emily Hayward Date: 15/06/21