

Horse Information Sheet

About:					
Horse's Name: Devious	Affair RF 'Ellie'				
Gender: mare	D.O.B: 13/11/2019	Colour: arey			
	Officially Measured: YES /NO Height Certificate: YES /NO				
Breed: warmbiood	Registration Details: <u>٧٧ ٧ ٩</u> ٠	mblood Association			
Sire: Daminos	Dam: Casual Affair				
Handling Information:					
Is the horse/pony safe to do the	ne following task:				
Catch: YES / NO	Lead: YES / NO	Groom: YES / NO			
Trim: YES / NO	Shoe: YES / NO	Worm: YES / NO			
Clip: YES / NO	Tie Up: YES / NO	Saddle: YES / NO			
Rug: YES / NO	Lunge: YES / NO	Feed: YES / NO			
Does the horse load easily ont	o a float: YES / NO	7			
Does the horse load easily ont	o a truck: YES / NO				
Does the horse travel well on a	a float/truck: YES / NO Has	not travelled			
If you have answered no or you	ur not sure about any of the ab	ove then please describe below:			
Ridden Information (under sac	ddle):				
Is the horse in ridden work: YE	S / NO If not when was it	last ridden:			
How long has the horse been ι	ınder saddle:				
Is the horse/pony safe to do th					
Mount: YES / NO					
Beach Ride: YES / NO	Ride Alone: YES / NO	Ride in Company: YES / NO			
Arena Ride: YES / NO	Showjump: YES / NO	X - Country: YES / NO			
		ove then please describe below:			



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What level home and/or rider would you say your horse requires:

Beginner	Intermed	iate	Advanced		
Has your horse competed	l: YES / NO	If yes, to wh	nat level:		
What level flatwork does	your horse have	e:			
What level does your hor	se happily jump	courses:			
Can your horse be safely	ridden barebac	:k: YES / NO			
Does your horse:					
Rear: YES / NO					
Buck: YES / NO				7	
Bolt: YES / NO					
Stop: YES / NO					
Nap: YES / NO					
If you answered yes or ar additional information at				e below and add any	
					
General Information:					
Kick: YES / NO		Bite: YE	S / NO		
Windsuck: YES / NO		Fence V	Walk: YES / NO		
Have Seperation Anxiety:	YES / NO	Weave:	YES / NO		
Get Grass Affected: YES /	NO	Head Fl	Head Flick/Shake: YES //NO		



Horse Information Sheet

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: JShear d
Full Name: Georgia Sheard Date: 29/9/22