



# MCS stables

8301 S State Route 89A Flagstaff, AZ 86005 (928) 774-5835

## OVERNIGHT BOARDING AGREEMENT

**Owner Information:**

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell: (\_\_\_\_) \_\_\_\_\_ Other: (\_\_\_\_) \_\_\_\_\_

Staying locally at: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Horse(s): \_\_\_\_\_ @ \$ \_\_\_\_\_ /day x \_\_\_\_\_ days Horse(s): \$ \_\_\_\_\_

Camping: \$ \_\_\_\_\_ /day x \_\_\_\_\_ days Camping: \$ \_\_\_\_\_

Total: \$ \_\_\_\_\_

**This agreement covers the horse(s) described as follows:**

1. Name: \_\_\_\_\_ Stall #: \_\_\_\_\_ Sex: \_\_\_\_\_

2. Name: \_\_\_\_\_ Stall #: \_\_\_\_\_ Sex: \_\_\_\_\_

3. Name: \_\_\_\_\_ Stall #: \_\_\_\_\_ Sex: \_\_\_\_\_

4. Name: \_\_\_\_\_ Stall #: \_\_\_\_\_ Sex: \_\_\_\_\_

5. Name: \_\_\_\_\_ Stall #: \_\_\_\_\_ Sex: \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

**PLEASE SIGN BACK OF THIS FORM**



## MCS STABLES RECEIPT

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Received From: \_\_\_\_\_ \$ \_\_\_\_\_