

Horse Identification & Emergency Contacts

Horse Name: _____

Breed: _____

Sex: _____

Color: _____

Microchip Number: _____

Microchip Company Name & Number: _____

Insurance Company & Number: _____

Tattoos/Markings: _____

Warnings/Behavior: _____

Owner Name: _____

Home Phone: _____

Cell Phone: _____

Email: _____

Veterinarian Name: _____

Veterinarian Number: _____

Emergency contact #1: _____

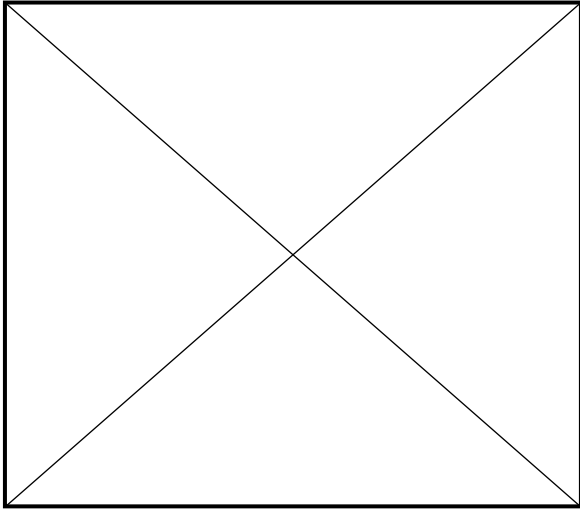
Emergency contact #2: _____

Feeding instructions: _____

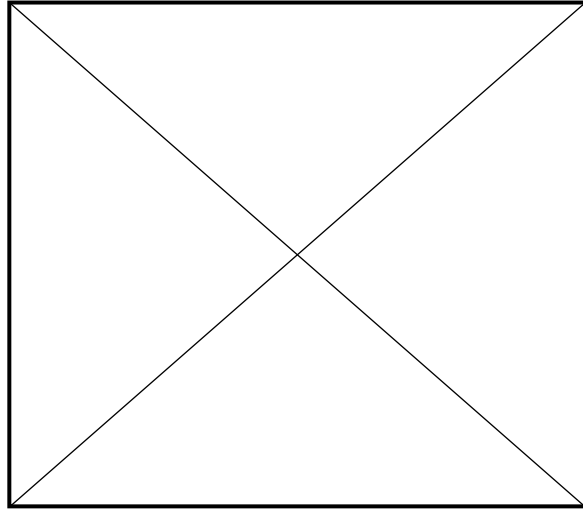
Medications & Dosage Instructions: _____

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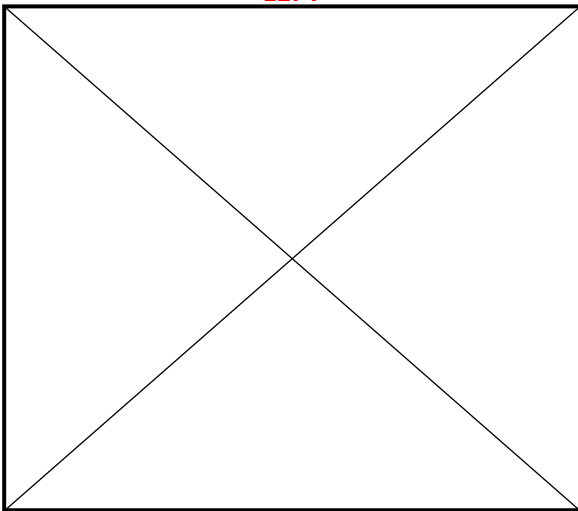
FRONT



BACK



LEFT



RIGHT

