Show/Training Records

232 Hooker Avenue
Poughkeepsie, NY 12603
800-836-3046
845-625-1577, fax
equineinfo@marshallsterling.com

Name of Insured:_____

Name of Horse:_____

Training Record (Include training fees only. Do not include, board, vet, farrier or other charges)

Name of Trainer:_____ Type of Training:_____

Number of days a week in training :_____Charge per month:_____

Show Record

Date of Show	Name of Show	Division	Class	Place in Class

* Attach a separate page if needed

For Pleasure Horses:

How often is horse ridden?_____ How many lessons are taken a week?_____

Do you jump horse?_____ What type of riding is done?_____

Please provide any additional information that substantiates the insured value you have requested:_____

_____

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