

OAK HOLLOW EQUESTRIAN CENTER, LLC

a Texas limited liability company

EMERGENCY CONTACT INFORMATION & VET RELEASE

NAME OF HORSE: _____

OWNER OF HORSE: _____

PRINCIPAL RIDER OF HORSE: _____

NAME OF ADULT CONTACT: _____

HOME PHONE: _____

WORK PHONE: _____

CELL PHONE: _____

VET NAME: _____

VET PHONE: _____

IMPORTANT: *If there is a medical emergency with your horse and you cannot be reached, what is the dollar limit we can authorize the vet to spend for treatment?*

** Minor Emergency (such as a bad cut): \$ _____

** Major Emergency (life-threatening): \$ _____

Other Information: _____

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