

Showtime Farms Training Worksheet

Horse's Name _____ Age _____

Start date _____ Desired length of training _____

Training History (List previous trainers and lengths of training as well as anything we should know)

Please tell us why is your horse in training?

Does your horse have any bad behaviors, quirks, triggers, mannerisms, or anything else that we should be aware of in regard to training?

Does your horse have any physical or lameness issues? Is it on any medications or supplements and if so which ones and what for? Please include any dental, hoof, or back issues.

Top things I would like my horse to work on in in training in order of priority:

1. _____

2. _____

3. _____

4. _____

5. _____

Is there anything you will be working on/goals as a rider or issues that you have when you are riding/ working with your horse including anything on the ground?

If showing, what classes are you planning on showing in (list top priorities 1st)

1. _____

2. _____

3. _____

4. _____

5. _____

Is there anything you DO NOT want us to do or work on while training your horse?

We will be sending updates twice a week for full time training and once a week for trainings of 3 days or less. This may include photos, video clips, and or a brief description of how your horse is progressing and what it is working on. Anything related to problems or lameness updates will be given immediately if they occur. How would you like your updates?

Text _____ Phone call _____ Email _____

Don't update me _____

Anything else you would like us to know?

Signature _____ Date _____