



NAME:	AME:		DATE OF BIRTH:	
RESIDENCE ADDRESS	:			
MAILING ADDRESS:				
HOME TEL:	BUS TEL: _	CELL:		
EMAIL:				
		DRIVER LICENSE:		
PREFERRED ACTIVIT		RIDING CLUB-FAMILY	□POLO CLUB	
FAMILY MEMBERS:			Age:	
_			Age:	
HORSE(S) OWNED:				
REFERENCES:				
A. Previous boarding	or training facility:			
Contact:		Phone:		
B. Bank reference:				
Contact:		Phone:		
AUTHORIZATION:				
boarding/training facilities, membership/boarding appl boarding/training facilities,	and bank/personal refe ication. I authorize my and bank/personal refe	nation about me from my credit so erences, to enable FAIR HILLS F credit sources, credit bureaus, cur erences to disclose to FAIR HILL sions regarding my application an	ARMS to evaluate my rent and previous S FARMS information about	
Date	_	Applicant's Signature		

2735 Santa María Road, Topanga, CA 90290 (818) 347-5049

FORM A REV. 6/2017