



# 4-H Horse and Pony Lease Agreement

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**Note:** This form is to be used by one Lessee (rider). If other Lessees are sharing the horse, they must each complete a separate form.

We, the undersigned, do hereby agree to the terms of the lease described herein:

This Horse Lease Agreement is made and entered into as of this \_\_\_\_\_ day of \_\_\_\_\_ (month, year) by and between:

Owner/Lessor: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
E-Mail: \_\_\_\_\_  
Phone: \_\_\_\_\_

Lessee: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
E-Mail: \_\_\_\_\_  
Phone: \_\_\_\_\_

“Horse” – Lessor leases to Lessee upon all conditions set forth herein the full- or part-time use of the Equid more fully described as:

Animal's Name \_\_\_\_\_ aka \_\_\_\_\_  
Breed \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_ Reg. No. \_\_\_\_\_  
Color \_\_\_\_\_ Markings \_\_\_\_\_

The Term of this Lease shall commence on \_\_\_\_\_, 20\_\_\_\_ and terminate on \_\_\_\_\_, 20\_\_\_\_ and can be cancelled at any time by mutual consent or by failure of the Lessee/Lessor to fulfill the conditions of the agreement as specified herein.

*In the Florida 4-H Horse Lease Program, the same animal may be leased by up to three 4-H members and all Lessees must conform to the requirements of the Florida 4-H Equine Program. If Horse is being leased by more than one person (4-H member or general public), then Lessor must disclose any persons that are leasing the Horse or that has access to the Horse's use. Neither the Lessee nor Lessor will lease or lend Horse to anyone during the period of the lease, nor will it be ridden or handled by other than Lessee except as specified below.*

4-H Members Leasing Horse: \_\_\_\_\_  
General Public Leasing Horse: \_\_\_\_\_  
Additional usage permissions/limitations by Lessor or Lessee: \_\_\_\_\_

*Addendums (4H HSF 01a) must be attached to this Agreement which specify responsibilities and limitations for the care and use of the Horse for all persons listed above. This Lease has \_\_\_\_\_ associated Addendums.*

Lessee shall be able to use the Horse on the following days and times during the term of this Lease:

\_\_\_\_\_  
\_\_\_\_\_

*The leased horse is permitted to show in Area/State 4-H Horse Show competitions with the following provisions:*

1. All project animal general rules, regulations and procedures apply to all lease parties.
2. Not more than three members may lease the same project animal.
3. 4-H Lease Agreement must be on file in the member's County Extension Office by December 31 of the current 4-H year.

*Lessee must specify below the way in which the horse will be used in 4-H Horse Shows.*

Lessee/Rider Age, check one:     Junior Member                       Intermediate Member                       Senior Member  
Discipline, Check applicable:     Hunter                       Western                       Saddle/Gaited                       Speed

If a shared Horse, refer to the current Area & State 4-H Horse Show rulebook for limits on classes entered. If there is to be a limit on number or types of classes entered in shows other than the Area and State 4-H Horse Shows, specify this limit here:

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Trophies, ribbons, premiums, pay-backs and all other awards will become property of the Lessor/Lessee as specified below.

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Conditions as to an extended lease, limitations for travel/showing, permissions for travel/showing, and/or any other stipulations pertinent to the Lease arrangement should be specified below.

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If during the term of this Lease the Horse is in exclusive possession of Lessee, Lessee agrees to take full responsibility for the care of the Horse at Lessee's expense. It is understood that the Lessee will follow practices of good animal husbandry in protecting Horse from illness, injury, or suffering. This will include all necessary immunizations, other veterinary care, proper and adequate food, water, shelter, and farrier attention. However, in case of illness and/or injury, the Lessee will notify the Lessor and report treatment and progress at reasonable intervals. Lessor shall have the right at any time, in person or by authorized agent, to request permission to go upon the premises where Horse is housed to inspect the Horse and determine if said Horse is being properly cared for and in good health.

Lessee warrants that the Horse has been inspected and agrees to accept said Horse in present condition. If Lessee maintains Horse in a location other than the Lessor's property, Lessee shall pay for and provide transportation of the horse from the Lessee to the Lessor at the termination of the lease.

The title and ownership of the leased Horse shall be and remain in the name of the Owner/Lessor. Lessee shall not assign this Lease nor sublease the horse covered. The leased Horse shall be turned over to the Lessor in a healthy condition as determined by an agreed upon veterinarian.

If Lessee is in the exclusive possession of the Horse during the Term of the Lease, Lessee will insure the Horse for the sum of \$\_\_\_\_\_ with the Lessor listed as beneficiary, and will keep up the payments on said full mortality insurance policy at the Lessee's expense for the duration of the Lease. In the event of death of the Horse, the Lessee will notify the Lessor at once. An autopsy, if deemed appropriate, will be performed by the veterinarian mutually agreed upon and expenses will be split between Lessee(s) and Lessor. If the full mortality insurance policy clause is mutually agreed upon as unnecessary, indicate its waiver by signing below.

Owner/Lessor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Owner shall not hold Lessee liable for any serious injury or death of the Horse arising from events not resulting from negligence on the part of the Lessee. Lessee shall hold the Lessor/Owner harmless for any injury to persons or damages to any property caused by the leased Horse when being used by the Lessee. The Lessee will carry a liability policy specifically on this Horse both for the Lessee's protection and for that of the Lessor.

If Horse is being shared by multiple Lessees, and/or is available for use by non-Lease-bound parties (for example, lessons), and/or remains on the property of the Lessor, then responsibilities for damages caused by Horse, injuries caused by Horse, or injuries to Horse during times when Lessee named on this Lease is absent will be handled as follows:

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If the Horse is a bred mare, the foal is to remain with the mare on Lessee's property until the mutually agreed upon weaning age (age \_\_\_\_\_). During the pre-weaning interval, the foal is subject to the same management and insurance conditions as the mare. The Lessee is not held responsible for a foal that is stillborn or does not stand and nurse. Breeding arrangements and disposition of a mare's offspring will be as specified below.

The Lessee agrees to pay to the Lessor the total sum of \$\_\_\_\_\_. Payment shall be made on the specified dates.  
\$\_\_\_\_\_ on \_\_\_\_\_, 20\_\_\_\_ \$\_\_\_\_\_ on \_\_\_\_\_, 20\_\_\_\_ \$\_\_\_\_\_ on \_\_\_\_\_, 20\_\_\_\_  
\$\_\_\_\_\_ on \_\_\_\_\_, 20\_\_\_\_ \$\_\_\_\_\_ on \_\_\_\_\_, 20\_\_\_\_ \$\_\_\_\_\_ on \_\_\_\_\_, 20\_\_\_\_  
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\$\_\_\_\_\_ on \_\_\_\_\_, 20\_\_\_\_ \$\_\_\_\_\_ on \_\_\_\_\_, 20\_\_\_\_ \$\_\_\_\_\_ on \_\_\_\_\_, 20\_\_\_\_

**The parent/guardian should sign for Lessee under 18 years of age.** No modification of this lease shall be binding unless in writing. I have read the foregoing and agree to the conditions as specified.

**Lessor Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
*(Sign in presence of a Notary)*

State of Florida, County of \_\_\_\_\_.  
The foregoing instrument was acknowledged before me this \_\_\_\_\_ by \_\_\_\_\_,  
who is personally known to me or who has produced \_\_\_\_\_ as identification and who did  
take an oath.  
\_\_\_\_\_  
\_\_\_\_\_  
(Signature) (Name Printed) Notary, Certificate No.

**Lessee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
*(Sign in presence of a Notary)*

State of Florida, County of \_\_\_\_\_.  
The foregoing instrument was acknowledged before me this \_\_\_\_\_ by \_\_\_\_\_,  
who is personally known to me or who has produced \_\_\_\_\_ as identification and who did  
take an oath.  
\_\_\_\_\_  
\_\_\_\_\_  
(Signature) (Name Printed) Notary, Certificate No.

Note: The University of Florida, IFAS, and 4-H are not parties in this lease and have no rights or responsibilities in any of its terms.  
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