

Grand Maple Farm L.L.C. 9520 Crane Rd. Milan, MI 48160

AUTHORIZED USER LIST

I, _____, as the Owner of the horse(s) named _____
authorize the following person(s) to handle, ride, medicate, or in any way “work with” my
horse(s). I understand an employee or agents of the Stable is automatically an authorized user
to handle or medicate, but not to ride my horse(s).

Date: _____

Name: _____

Phone number(s): _____

Authorized for:

Date: _____

Name: _____

Phone number(s): _____

Authorized for:

Signed: _____ Date: _____