

**HOOFER EQUESTRIAN CENTER
BOARDER PAYMENT TRACKING FORM**

Please return this sheet with your monthly payment

Boarder Name(s): _____ **Horse Name(s)** _____

Make checks payable to:

WISCONSIN UNION
Hoofers
800 Langdon St. (Students must
Madison, WI 53706 include ID#)

Late fees: \$5/horse for payments received after the 5th of the month
\$30/horse for payments received after the 15th of the month

Board Exchange Information Only

___ Instructor ___ Stable staff ___ Horse Use

For the month of: _____

hours worked: _____
(or # lessons boarder horse was used)

Total \$ amount: _____

PAYMENT FOR THE MONTH OF _____

Indoor board: \$315 x _____ (# horses) \$ _____

Late fee (after the 5th) \$5 x _____ (# horses) _____

Late fee (after the 15th) \$30 x _____ (# horses) _____

Vehicle storage: \$30 x _____ (# vehicles) _____

Extra feed: .10 x _____ (# pounds) _____

Other: _____

Subtract for Exchange Hours

(Please attach a copy of your signed work hours form)

TOTAL ENCLOSED \$ _____

FOR OFFICE USE ONLY:

INVOICE #

DATE

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