

Saddle Fitting Form

Date:

Customer:

Address:

Phone:

Email:

Fitting address:

Notes:

7 year old
+ bred mare.
Rehab after spell back into work.

SADDLE DETAILS

Date purchased:

New / Secondhand

Saddle Manufacturer:

Model:

Size:

Colour:

Fit:

Saddle adjustments:

FUF date:

Saddle adjustments FUF:

RIDER DETAILS

Height:

Weight:

Age:

HORSE DETAILS

Name:

Breed:

Age:

Sex:

Height:

Colour:

Experience/Diipline:

Weight tape measurement:

Condition:



The SADDLE FITTER
Email: info@thesaddlefitter.com.au

Specialising in quality saddles and service for horse and rider

ABN: 98 816 526 711

Book No. _____ Target Deposit details

BSB: 032-584 Acc. No: 19-4035

Information given on this form is not sufficient for a non-qualified person to purchase and fit a saddle. Should a saddle be purchased from an alternative source using this information no responsibility for the suitability or the fit of that saddle will be accepted by the saddle fitter who provided these records.