2016 Breeding Shed Requirements

58 Dunn Rd.

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MARE:OWNER OF MARE:			REQUE	REQUESTED BREEDING DATE:AGE/COLOR:		
			AGE/C0			
			2015 STATUS: BARREN MAIDEN FOALING			
015	COVERING STALLION:	ION: LAST COVER DATE:				
		n must accompa st have proper iden	-	_		
led	ase CIRCLE the appropri	ate requirements b		e necessary paperv		
	Mare Type	1 st Trip	2 nd Trip	3 rd Trip	4 th Trip	
	Maiden Mare **hind shoes removed**	Shed Form JUMPED prior to arrival	Shed Form	Shed Form Neg. Uterine Culture	Shed Form Neg. Uterine Culture	
	Barren Mare	Shed Form Neg. Uterine Culture	Shed Form	Shed Form Neg. Uterine Culture	Shed Form Neg. Uterine Culture	
	Foaling Mare	Shed Form	Shed Form Neg. Uterine Culture	Shed Form Neg. Uterine Culture	Shed Form Neg. Uterine Culture	
	·	mission to tranquili the mare has any ch	•	-	, 	
rm	Name:		Farm Manager's	Phone #:		
na	ature of Owner or Autho	rized Agent:				