

SERVICE CERTIFICATE

Name of Stallion: _____ Name of Mare to be Served: _____

Colour of Mare: _____ Age of Mare: _____

Microchip number: _____ Address of the Mare Owner: _____

Name of Mare Owner: _____

Date on which Mare was served (Last date of service):

Was the Mare (Please tick the box which applies):

- Artificial breeding - on farm (please include AI certificate)
- Artificial breeding - shipped semen (please include AI certificate)
- Embryo Transfer (please include AI and ET certificate) / Other

Service Location & Name of Person who executed the Service or Insemination

Approximate Foaling Date:
(345 days from date of last service)

Colour of Foal: _____ Sex: _____ Foaling Date: _____

I hereby certify that the above information is correct.

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Date: / /