



**Tintagel Enterprises, Ltd ~ Sarah Hollis**  
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## Breeding Form

### **Contact:**

Mare Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ Fax: \_\_\_\_\_

City: \_\_\_\_\_ Country: \_\_\_\_\_

State, zip: \_\_\_\_\_

### **Ship Semen to:**

Farm/Clinic: \_\_\_\_\_ Veterinarian: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Fax: \_\_\_\_\_

City: \_\_\_\_\_ Country: \_\_\_\_\_

State, zip: \_\_\_\_\_

### **Mare Info**

Mare's registered name: \_\_\_\_\_

Breed: \_\_\_\_\_ Registration #: \_\_\_\_\_

Age: \_\_\_\_\_

Has this mare ever been bred before? \_\_\_\_\_ Method of Breeding? \_\_\_\_\_

How many times was mare bred to achieve a pregnancy? \_\_\_\_\_

Any prior retained placenta? \_\_\_\_\_ Any prior Caslicks? \_\_\_\_\_ Any prior abortions? \_\_\_\_\_

Any prior early embryonic loss? \_\_\_\_\_

Any past uterine infections? \_\_\_\_\_

Any foaling damage or difficulty? \_\_\_\_\_

Any special care mare needs to maintain a pregnancy? \_\_\_\_\_

Does the mare cycle regularly? \_\_\_\_\_ Show heat well? \_\_\_\_\_

Last year bred was \_\_\_\_\_ Last year foaled was \_\_\_\_\_

Moat recent vaccinations and worming: \_\_\_\_\_

Expected month semen will be requested: \_\_\_\_\_

**Mare's veterinarian**

Vet's name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Fax: \_\_\_\_\_

City: \_\_\_\_\_ Country: \_\_\_\_\_

State, zip: \_\_\_\_\_

**Miscellaneous**

Does Fed ex delivery to you on Saturday? \_\_\_\_\_