

**TRAVIS HALL EQUESTRIAN CENTRE**  
**R.R. 3 ROCKWOOD, ONTARIO, CANADA, NOB 2KO**

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**TRANSPORTED SEMEN REPORT**

For resulting foal to be eligible for registration:

1. The Veterinarian's signatures are mandatory.
2. Pregnancy testing must be completed within 60 days after the last breeding.

This is to certify that, on the dates shown, I \_\_\_\_\_, a fully qualified and licensed veterinarian, in the province of \_\_\_\_\_, artificially inseminated the mare \_\_\_\_\_ . And only said mare, Registration number \_\_\_\_\_, owned by \_\_\_\_\_ of \_\_\_\_\_, whose description corresponds in every detail with the identification certificate on the following page, with the semen of the stallion \_\_\_\_\_, owned by \_\_\_\_\_ of \_\_\_\_\_. I also acknowledge receipt of semen in adequately identifies container(s), and I personally discarded unused excess semen.

\_\_\_\_\_  
 Veterinarian's signature, or Inseminating Technician

Veterinarian's signature	Breeding	Date Semen received	Container Identity	Insemination Date
	1.			
	2.			
	3.			
	4.			
	5.			

I hereby certify that the above mare was pregnancy tested at \_\_\_\_\_ days

by \_\_\_\_\_ rectally \_\_\_\_\_ blood test \_\_\_\_\_ ultrasound

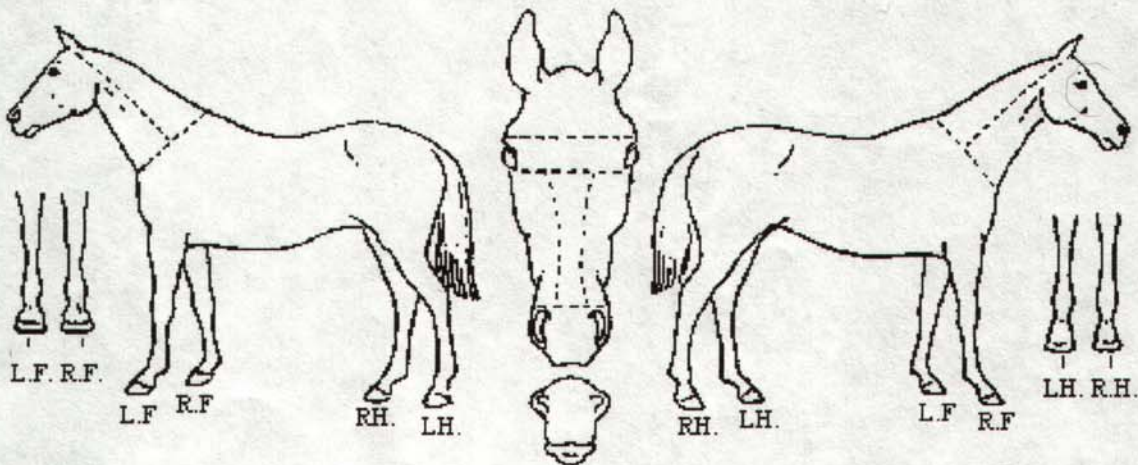
and was found to be \_\_\_\_\_ in foal \_\_\_\_\_ not in foal.

\_\_\_\_\_  
 Veterinarian's signature.

## MARE IDENTIFICATION CERTIFICATE

Whorls must be shown thus  
"X" and described below  
in detail

Name of Animal



Please ensure that diagram and written description agree. Also type or use block capitals

White markings to be shown in red

Colour	Date of Birth / / 19	Sire	Dam
Head			
Left fore			
Right Fore			
Left hind			
Right Hind			
Body			
Acquired			