



All Seasons Farms, LLC
Horse Information

General Information:

Horse Name: _____ Breed: _____ Age: _____

Reg #: _____ Open: Yes or No or N/A Maiden: Yes or No or N/A

Stallion Booked: _____

Bred Last Year: Yes or No Prior Foals: Yes or No How many: _____

Pertinent Breeding History: _____

In Foal Mares:

Expected Foaling Date: _____ Last Breeding Date: _____

In Foal To: _____

Previous Breeding Manager & Phone #: _____

Caslicks: Yes or No

Mare's Foaling Habits: _____

If wet (foal @ side), date foaled: _____ Foal Wormed: _____

Immunization Records & Dates:

Eastern/Western (Encephalomyelitis): _____ WNV: _____

Rhino (EHV-1): _____ Influenza(injectable): _____

Rhino (EHV-4): _____ Influenza(internasal): _____

Botulism: _____ Potomac Horse Fever: _____

Rabies: _____ Strangles: _____

Tetanus: _____ Neg. EVA _____

Test/vaccination: _____ Health Cert: _____

Neg. Coggins: _____

Blacksmith – Last Date: _____ Pneumabort: _____

Last Worming Date: _____ Type: _____

State any Medical History, Handling or Habits that are pertinent:

Special Dietary Requirements? Allergies?: _____

Items that Accompany Horse (describe): _____

Insurance:

Insured: Yes or No Insurance Company: _____

Policy #: _____ Phone #: _____

Agent: _____

Office Use Only:

Date IN: _____

Date OUT: _____

All Seasons Farms

1011 Edgehill Drive

Lawrenceburg, KY 40342

Lindsey James (805) 801-5776 Lauren Smead (859) 509-9192

Fax (502) 839-0064

www.allseasonsfarms.com Lindsey@coastalequineranch.com