

Mare Information/Disclosure Statement

GENERAL INFORMATION:

Mare Name: _____ Breed: _____ Age: _____

Reg. # : _____ Open: Y or N Maiden: Y or N

Stallion Booked: _____

Bred Last Year: Y or N Prior Foals: Y or N How Many: _____

Pertinent Breeding History:

IN FOAL MARES:

Expected foaling date: _____ Last Breeding

Date: _____

In Foal to: _____

Previous Breeding Manager and Phone # _____

Caslicks: Y or N

Mare's Foaling Habits:

If Wet (foal at side), date foaled: _____ Foal Wormed: Y or N

MARE IMMUNIZATION RECORDS & DATES:

Eastern/Western (Encephalomyelitis): _____ West Nile Virus: _____

Rhinopneumonitis (EHV-1): _____

Influenza (inject able): _____

Rhinopneumonitis (EHV-4): _____

Influenza (internasel): _____

Botulism: _____

Potomac Horse Fever: _____

Rabies: _____

Strangles: _____

Tetanus: _____

Neg. EVA

test/vaccination: _____

Health Cert: _____

Neg. Coggins: _____

MARE :

Blacksmith- Last Date: _____

Last Worming Date: _____

Type: _____

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

Special dietary requirements? Allergies?:

Items that Accompany Mare (type and description):

INSURANCE:

Insured: Y or N

Insurance Company: _____

Policy Number: _____ Phone: _____

Agent: _____

All Seasons Farms

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