



MARE INFORMATION, Artificial Insemination
Please return to:
Jessica Wisdom - 7506 NE 239th St. Battle Ground, WA 98604

Mare's Name: _____

Month/dates you desire the mare to be bred: _____

Primary Breed Registry & Numbers: _____

Mare's Age _____ Height _____ Color _____

Mare's breeding history _____

(Last foaling date; number of foals birthed, any complications/deaths, inability to settle the mare; continue below if necessary]

Date and type of most recent vaccinations: _____

Date and kind of most recent worming: _____

Date of pre-breeding or vaginal culture/cytology: _____

Name/Telephone mare's vet: _____

Address where semen is to be sent: _____

Other Relevant Information About the Mare

Mare Owner's Name _____

Signature of Mare Owner

Date

Address/Tel. Of Owner: _____

Email _____ Website? _____