



Dear National Sale Consignors:

On behalf of the 2024 National Clydesdale Sale, we would like to thank you for your support of our sale. Our sale committee has been working hard and we all are looking forward to another great sale this year.

Enclosed you will find 3 forms:

1. National Sale Breeding Form
2. Sale/Export Statement (not needed for Canadian consignments)
3. Vaccination Record/worming

Please have these forms filled out and turn in at the sale during check in. Remember all coggins will need to be dated in the 2024 Calendar year.

All consignors are welcome to attend the barn party on Thursday, April 18th at 5pm. It will include a meal, beverages, and door prizes. Attendance is not mandatory but we want to encourage you all to be there if you are able.

For onsite feed or bedding needs contact Rex Evans (Evans Cartage) Springfield, IL 217-899-6001

PLEASE INFORM ANDREW STALHIEM (715-554-0929) IF YOU HAVE ANY SCRATCHES FOR THIS SALE BY APRIL 3rd, 2024 so we can accurately plan for stalling placements.

Thank you again for your support!
See you in Springfield!

Sincerely,
National Clydesdale Sale Committee

Clydesdale Breeders of the U.S.A
16402 Village Parkway, PO Box 345
Fredricktown, OH 43019
Phone – 815.247.8780 ~ email – secretary@clydesusa.com
Website – www.clydesusa.com



NATIONAL CLYDESDALE SALE BREEDING FORM

All mares consigned to the National Clydesdale Sale of breeding age must fill out this form. **No mare will be sold as "in foal" at the National Sale without being certified as such by a Veterinarian.** This form shall be submitted to the National Sale Office along with the other required health and coggins test paperwork when checking in at the Sale.

Lot No. _____

Consignor's Name _____

Mare's Name _____ Reg. No. _____

Stallion's Name _____ Reg. No. _____

Date of Service _____

Veterinarian Certification (certification shall be within 30 days of the National Sale)

I, _____ am licensed in the State of _____, and have examined
(Veterinarian's Name) (State)

the above identified mare on _____ and certify that said mare is:
(Date)

_____ In foal (normal single pregnancy); or

_____ Open; or

_____ Pregnancy status cannot be determined at this time.

Veterinarians Signature _____

I, the Consignor, guarantee the above information to be accurate and true. I understand that any guarantees are strictly my responsibility and release the Clydesdale Breeders of the U.S.A. and the National Sale Committee from any responsibility.

Consignor's Signature _____ Date _____

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Sale/Export Statement

Certification statements for horses going to public sale with the potential to be purchased by Canadian buyers.

This form to be completed by the horse's regular veterinarian

1. The animal was, to the best of my knowledge and belief, not exposed to any communicable disease within 60 days preceding the date of inspection and shows no clinical signs of CEM on the date of inspection.
2. The animal, at the time of inspection, was found to be healthy and in a physical condition fit to be transported.
3. The horse resided in the United States or Canada since birth or has met all the import requirements of the United State and has resided within the United States for the past 60 days.
4. The horse has not been on the premises where T.equigenitalis has been isolated during the past 60 days immediately preceding exportation to Canada or premises currently under quarantine or investigation for CEM. If female, it has not been bred naturally to or inseminated with, semen from a stallion positive for CEM, or a stallion resident upon a positive premises or under quarantine or investigation of CEM.
5. The Exporter has been advised that any deterioration in health or physical condition of the animal(s) that may render animal(s) unfit for transport may result in the shipment to be refused entry into Canada.
6. During the previous 21 days, the horse described below has not been in the State of Texas or New Mexico or outside the state of _____.
7. Regarding Vesicular Stomatitis (VS), all states in which animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of Vesicular Stomatitis during the past twenty-one (21) days immediately prior to export to Canada.

To Be Completed By Horse's Regular Vet

Name Of Horse: _____ Registration Number: _____

Owner of Horse: _____

Description of Horse: Breed _____ Sex _____ Age _____ Color _____

Leg Markings: Left Front _____ Right Front _____

Left Hind _____ Right Hind _____

Markings: _____

Name of Veterinary: _____

Certificate of Veterinary Inspection #: _____

Signature of Veterinary _____ Date: _____

