MARE INFORMATION SHEET

NAME OF MARE: _____ YEAR OF BIRTH: _____ COLOR: _____

Sire: _____ Dam: _____ Dam's Sire: _____

Mare's current status: ☐ Foaling ☐ Barren ☐ Maiden ☐ Slipped/Aborted ☐ Not Bred

Mare's 2027 produce (if applicable): Foaling date: _____ Sex: _____ Color: _____

Stallion bred to in 2026: _____ Last cover date in 2026: _____

Past Foaling Issues: _____ Sutured: _____

Veterinary History

Last dates of following vaccinations:

Tetanus Toxoid: _____ West Nile: _____ Rhino: _____ Flu: _____ Strangles: _____

Encephalomyelitis (E&W): _____ Last Worming Date: _____ Product used (if known): _____

Founder/Laminitis: _____ Date: _____ Allergies/Other: _____

Colic: _____ Frequency: _____ Treatment Cost amount: _____

Preferred Surgery Center, if option: _____

COMMENTS: Please list any information relating to status, condition or disposition of your mare that you feel are important for foaling and the breeding shed to have on file: _____

_____

Insurance Agent: _____ Company Name: _____

Agent Phone: _____ Emergency Phone: _____

Emergency Contact: _____ Phone: _____

Signature of Owner (or Authorized Agent) _____ Date _____

NAME OF MARE OWNER as reported to The Jockey Club: _____

ADDRESS OF OWNER: _____

EMAIL: _____ PHONE: _____

THIS FORM MUST BE ON FILE PRIOR TO MARE BEING BOOKED