



Broodmare Information - Foaling Out

Mare's Name:	Breed:
Date of Birth / Age:	Color:
Mare's Registration Number:	Due Date:
Owner's Information:	
Stallion's Name::	Breed:
DISTINGUISHING MARKS/SCARS:	
BEHAVIORAL/MEDICAL ISSUES:	
MY MARE IS (Select applicable):	
☐ Maiden (Never foaled before)☐ Has had foals before with no issues☐ Has had foals before but required assistance	
MY MARE WAS BRED VIA (Select applicable): \[\textstyle \text{Artificial Insemination - Fresh/Cooled Semen} \] \[\text{Artificial Insemination - Frozen Semen} \] \[\text{Recipient Mare from Embryo Transfer program - please provide more information below.} \] \[\text{Live Cover}	
COMMENTS OR CONCERNS (If applicable)	

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