

# VISITING MARE DETAILS



Name of Mare ..... Colour.....

Date of Birth.....By.....

Out of .....Passport No.....

Mare status \* Maiden/In foal/Barren/Foaled

Foal details \*Filly/Colt

Date of Birth .....

(\*please delete as appropriate)

Last Service Date .....Last Covering Stallion .....

Resident Stud

Owner's Name and Address

.....  
 .....  
 .....

.....  
 .....  
 .....

Telephone .....

Telephone .....

Fax/e-mail .....

Fax/e-mail .....

Veterinary Surgeon .....

Veterinary Surgeon .....

Billing Name and Address if different

.....  
 .....

Telephone .....

Fax/e-mail .....

## General Information

	Yes/No	If so When/Where
Was the mare bought at auction during the last year?	.....	.....
Has the mare ever had 'Virus Abortion'?	.....	.....
Have other mares at your stud had 'Virus Abortion'?	.....	.....
Insurance	.....	Value.....
Has the mare had/been in contact with other infectious diseases including Strangles and Salmonellosis?	.....	.....
Is mare stitched?	.....	.....
Vaccinated against Tetanus Toxoid?	.....	.....
'Flu vaccine?	.....	.....
Pneumabort K/EHV 1.4?	.....	.....
Date of Negative Coggins blood test	.....	.....
Has mare been out of mainland Britain during past 12 months?	.....	.....
EVA blood test date	.....	Positive/Negative

*Every care will be taken with your mare/foal but no responsibility whatever is accepted for any accident, disease, injury or death for your mare and /or foal whilst visiting Charlock Stud.*

Signature ..... Date .....

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 info@charlockstud.com