

Breeding Sessions: 7:00 AM,
2:30 PM & 5:00 PM
Office Hours: M-F 7AM- 5PM
Weekends/Holidays: 7AM-Noon



Office Phone: 859-255-8290
Fax Number: 859-281-6148
Shed Entrance: 648 North Yarnallton Pike

Booking Contacts: Allison Henshaw & Katie Wills
Booking Email: ahenshaw@hillndalefarms.com
After Hours Emergency Contact: Larry Walton (Stallion Manager) 859-707-4124

2018 Breeding Shed Form

THIS BREEDING SHED FORM MUST ACCOMPY THE MARE EACH TIME SHE IS PRESENTED FOR BREEDING

Stallion: _____ Mare: _____
Breeding Session Date: _____ Breeding Session Time: _____
Mare Age: _____ Mare Color: _____
Microchip No. (If Applicable): _____ Tattoo No. (If Applicable): _____
Boarding Farm: _____ Boarding Contact: _____
Boarding Phone: _____ Boarding Email: _____
Farm Veterinarian: _____ Veterinarian Phone: _____

Please Check Beginning Status: Foaling Barren Maiden Not Bred in 2017 Imported for 2018 Breeding

Foaling Mare: Date Foaled: _____ Color: _____ Sex: _____ Sire: _____

ALL MARES MUST BE ACCOMPANIED BY THIS FORM EVERY TRIP & HAVE PROPER ID (HALTER OR NECK STRAP) TO BE BRED

- Cultures must be over 48 hours old but within 30 days. Cultures must be taken from the same heat cycle.
- Mares that do not have appropriate documents (listed below) will **NOT** be bred.

▪ CEM & EVA Requirements: Hill 'n' Dale Farms will comply with the 2017 regulations set forth by the USDA and the Kentucky Department of Agricultural in regards to CEM and EVA

	1 st Trip	2 nd Trip	3 rd Trip	4 th Trip	Double
Domestic Maiden	<ul style="list-style-type: none"> ▪ Shed Form ▪ Uterine Culture ▪ Jumped 	<ul style="list-style-type: none"> ▪ Shed Form 	<ul style="list-style-type: none"> ▪ Shed Form ▪ Uterine Culture 	<ul style="list-style-type: none"> ▪ Shed Form ▪ Uterine Culture 	<ul style="list-style-type: none"> ▪ Shed Form
Domestic Barren	<ul style="list-style-type: none"> ▪ Shed Form ▪ Uterine Culture 	<ul style="list-style-type: none"> ▪ Shed Form 	<ul style="list-style-type: none"> ▪ Shed Form ▪ Uterine Culture 	<ul style="list-style-type: none"> ▪ Shed Form ▪ Uterine Culture 	<ul style="list-style-type: none"> ▪ Shed Form
Domestic Foaling	<ul style="list-style-type: none"> ▪ Shed Form (Uterine Culture if foal did not stand & nurse) 	<ul style="list-style-type: none"> ▪ Shed Form 	<ul style="list-style-type: none"> ▪ Shed Form ▪ Uterine Culture 	<ul style="list-style-type: none"> ▪ Shed Form ▪ Uterine Culture 	<ul style="list-style-type: none"> ▪ Shed Form
Imported Maiden	<ul style="list-style-type: none"> ▪ Shed Form ▪ Uterine Culture ▪ 2 CEM Cultures (1 set to include an endometrium swab) ▪ Negative CF Test ▪ Jumped 	<ul style="list-style-type: none"> ▪ Shed Form 	<ul style="list-style-type: none"> ▪ Shed Form ▪ Uterine Culture 	<ul style="list-style-type: none"> ▪ Shed Form ▪ Uterine Culture 	<ul style="list-style-type: none"> ▪ Shed Form
Imported Barren	<ul style="list-style-type: none"> ▪ Shed Form ▪ Uterine Culture ▪ Quarantine Release ▪ Endometrium CEM Culture 	<ul style="list-style-type: none"> ▪ Shed Form 	<ul style="list-style-type: none"> ▪ Shed Form ▪ Uterine Culture 	<ul style="list-style-type: none"> ▪ Shed Form ▪ Uterine Culture 	<ul style="list-style-type: none"> ▪ Shed Form
Imported Foaling	<ul style="list-style-type: none"> ▪ Shed Form ▪ Quarantine Release ▪ Endometrium CEM Culture 	<ul style="list-style-type: none"> ▪ Shed Form 	<ul style="list-style-type: none"> ▪ Shed Form ▪ Uterine Culture 	<ul style="list-style-type: none"> ▪ Shed Form ▪ Uterine Culture 	<ul style="list-style-type: none"> ▪ Shed Form

This mare has been vaccinated for Equine Herpes Virus Type-1 in the last 7-90 days prior to breeding.

Date of Vaccination: _____ Type of Vaccination: _____

Does this mare have any characteristics or conditions that our breeding shed needs to be aware of: _____

I hereby give permission to Hill 'n' Dale Farms to tranquilize the above mare if it is necessary for her to be bred safely.

Yes NO

Signature: _____

Date: _____