



Harris Farms

Mare Information Sheet

PLEASE RETURN WITH CONTRACT

Please attach a copy of the Jockey Club registration papers.

Owner's Name _____ Telephone (work) _____
Address _____ (Home) _____

E-mail address: _____ (Cell) _____
Social Security # _____

Mare's Name _____ Color _____ DOB _____
Sire _____ Dam _____
Dam's Sire _____
Mare's Status Barren In Foal Slipped Maiden

Stallion Bred to in 2016 _____ Last Breeding Date _____
Farm and State Stallion Stands _____ Date Foaled 2016 _____
Farm mare boarded in 2016 _____ Foal Color _____ Sex _____

STALLION TO BE BRED TO IN 2017

Mare Production History (last two years)

Foal DOB	Color & Sex	Sire of foal
1. _____	_____	_____
2. _____	_____	_____

Mare Health History

***PLEASE DESIGNATE DATES VACCINATIONS WERE GIVEN**

EEE/WEE _____ Influenza _____ Strep _____ Tetanus _____
Rabies _____ Rhino/Pneumabort _____ West Nile x 2 _____
Rota Virus _____ Dewormer and date _____
Past surgeries _____

***This section must be filled out in full. All horses must be current on vaccinations upon arrival. Horses that are not current or arrive with inadequate records will be vaccinated by HFI at the owner's expense.**

Insurance

Is Mare Insured? _____ Contact # _____
Insurance Agent _____

Signature Owner/Agent: _____ Date: _____