**Addendum 11n**

**Covering Year:**

**Stallion and Mare Covering Return**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Stallion Information** | | | | | | | | | |
| Stallion Name | |  | | | SHS Reg ID | | |  | |
| Stallion Owner | |  | | | Licence Number | | |  | |
| Address | |  | | | Postcode | | |  | |
| Tel No | | |  | |
| Was the Stallion swabbed as required by HBLB requirements? Yes / No  When was the Swab Certificate sent to the SHS office? | | | | | | | | | |
| **Mare Information** | | | | | | | | | |
| **Mare Name** | |  | | | **SHS ID** | | |  | |
| **Mare Owner** | |  | | | **Tel No** | | |  | |
| **Address** | |  | | | **Postcode** | | |  | |
| Was the mare swabbed on arrival? Yes / No | | | | | | | | | |
| **Covering Information**  (Please circle as appropriate) | | | | | | | | | |
| Natural | AI Chilled | | AI Frozen | Cloning | | Embryo Transfer | | | Sexed Semen |
| Who travelled to the covering – Mare / Stallion? | | | | Please details of covering dates (below) | | | | | |
| Was the mare scanned before leaving? Yes / No | | | | 1. | | | | | |
| Scanned In FOAL before leaving? Yes / No | | | | 2. | | | | | |
| To your knowledge is the mare in foal? Yes / No | | | | 3. | | | | | |
| Did a vet assist? If so please give details: | | | | 4. | | | | | |
| 5. | | | | | |
| 6. | | | | | |
| Signature of stallion owner: | | | | | | | Date | | |
| Signature of mare owner: | | | | | | | Date | | |

**The top copy must be given to the mare owner to return with the foal registration documents.**

**The bottom copy must be returned to the SHS office by the 1st October**