**APPLICATION FOR SERVICE**

TO;                                                      FOR THE 20       SEASON

BROODMARE DETAILS:

MARES NAME:.

        DAM:..SIRE:

YEAR OF FOALING:..COLOUR:.BRAND:

HISTORY OF MARE:

PLEASE INDICATE IF EXPECTING FIRST FOAL & LAST DAY SERVICE.

IF MAIDEN MARE, DATE RETIRED FROM RACING.

IF MARE SLIPPED OR MISSED GIVE REASON(IF KNOWN).

PLEASE DO NOT SERVE MY MARE AFTER .

PLEASE SPECIFY ANY UNUSUAL CHARACTERISTICS OF THE MARE

WHICH THE STUD SHOULD BE AWARE OF:





**THIS SECTION MUST BE COMPLETED.**

HAS THE MARE BEEN IN CONTACT WITH VIRAL ABORTION,

CONTAGIOUS EQUINE METRITIS, STRANGLES, EQUINE HERPES

VIRUS, OR ANY OTHER INFECTIOUS DESEASES?..

INSURANCE DETAILS:

MY MARE IS/IS NOT INSURED WITH

OWNERS NAME FOR ACCOUNTS.

POSTAL ADDRESS FOR ACCOUNTS.

RESIDENTIAL ADDRESS..

CONTACT NUMBERS: (BUS)..(A/HS)..

**FEES PAYABLE UP-FRONT AND ARE NON-REFUNDABLE**

**BULK VET FEE $350 + GST**

**HANDLING FEE $350 + GST**

**10% DEPOSIT OF SERVICE FEE + GST**

PLEASE COMPLETE THE STALLION SERVICE CONTRACT OVER.