

3082 Walnut Hill Road, Lexington, Kentucky 40515

Booking Line: 859-272-7620 Office: 859-272-7629 Fax: 859-272-5361

PLEASE EMAIL ALL SHED PAPERWORK TO: Shedpaperwork@Juddmonte.com DIRECT BOOKING LINE: 859-272-7620

2024 Booking Hours:

Monday - Friday 8:00 AM - 4:30 PM Saturday - Sunday 8:00 AM - 12:00 PM DATE: _____ BREEDING SESSION (select one): 9:00 AM 2:00 PM STALLION: 6:00 PM_____ Other MARE: ______ Age/Color: _____ *Microchip # (if applicable)* ___ Mare's Sire: Mare's Dam: Mare <u>must</u> have proper identification (halter nameplate or neckstrap) in order to be bred. All mares must be vaccinated for EHV 1 (i.e. Rhinomune, Pneumabort K, etc.) between 7 and 90 days of being covered by a Juddmonte stallion. There will be NO EXCEPTIONS: Date of vaccination:

Type of vaccination:

Administered by: PLEASE CIRCLE THE APPROPRIATE REQUIREMENTS FOR EACH TRIP THAT NEED TO ACCOMPANY THE MARE AND ATTACH THE NECESSARY PAPERWORK. THE MARE WILL NOT BE BRED WITHOUT THESE DOCUMENTS. 1ST TRIP 2ND TRIP 3RD TRIP 4TH TRIP & ETC. DOUBLE DOMESTIC Shed Form Shed Form Shed Form Shed Form Shed Form MAIDEN: Uterine Culture Uterine Culture Uterine Culture Jumped DOMESTIC Shed Form Shed Form Shed Form Shed Form Shed Form BARREN: Uterine Culture Uterine Culture Uterine Culture DOMESTIC Shed Form Shed Form Shed Form Shed Form Shed Form FOALING: Uterine Culture **Uterine Culture** IMPORTED Shed Form Shed Form Shed Form Shed Form Shed Form MAIDEN: Uterine Culture Uterine Culture **Uterine Culture** ** Breed last 2 CEM Cultures in session *1 set to include an Endometrium Swab Quarantine Release (if applicable) IMPORTED Shed Form Shed Form Shed Form Shed Form Shed Form BARREN: Uterine Culture Uterine Culture **Uterine Culture** ** Breed last Ouarantine Release Endometrium CEM Culture in session Shed Form IMPORTED Shed Form Shed Form Shed Form Shed Form FOALING: Ouarantine Release Uterine Culture Uterine Culture ** Breed last **Endometrium CEM Culture** in session *CEM requirements: Juddmonte will comply with the 2024 USDA & Kentucky Department of Agriculture regulations pertaining to CEM. DO WE HAVE PERMISSION TO TRANQUILIZE THIS MARE IF NECESSARY (check one)? YES NO Please tell us if this mare has any characteristics or conditions that our breeding shed needs to be aware of (for example, difficult to handle, sight impairments, etc.): ___ Farm Manager/Person Completing this Form:______ Farm Office Telephone: _____ Mobile Phone: _____

Veterinarian's Phone: ______

Farm Veterinarian: