JUDDMONTE

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

2027 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 must 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 MAIDEN:	Shed Form Uterine Culture Jumped	Shed Form	Shed Form Uterine Culture	Shed Form Uterine Culture	Shed Form
DOMESTIC BARREN:	Shed Form Uterine Culture	Shed Form	Shed Form Uterine Culture	Shed Form Uterine Culture	Shed Form
DOMESTIC FOALING:	Shed Form	Shed Form	Shed Form Uterine Culture	Shed Form Uterine Culture	Shed Form
IMPORTED MAIDEN: ** Breed last in session	Shed Form Uterine Culture 2 CEM Cultures *1 set to include an Endometrium Swab Quarantine Release (if applicable)	Shed Form	Shed Form Uterine Culture	Shed Form Uterine Culture	Shed Form
IMPORTED BARREN: ** Breed last in session	Shed Form Uterine Culture Quarantine Release Endometrium CEM Culture	Shed Form	Shed Form Uterine Culture	Shed Form Uterine Culture	Shed Form
IMPORTED FOALING: ** Breed last in session	Shed Form Quarantine Release Endometrium CEM Culture	Shed Form	Shed Form Uterine Culture	Shed Form Uterine Culture	Shed Form

*CEM requirements: Juddmonte will comply with the 2027 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: _____ Farm Manager/Person Completing this Form:_____

Farm Office Telephone: _____ Mobile Phone: _____

Farm Veterinarian: _____ Veterinarian's Phone: _____